

Health Insurance Program Monthly Report



Prepared for:

Kentucky Group Health Insurance
Board Members

February 2019

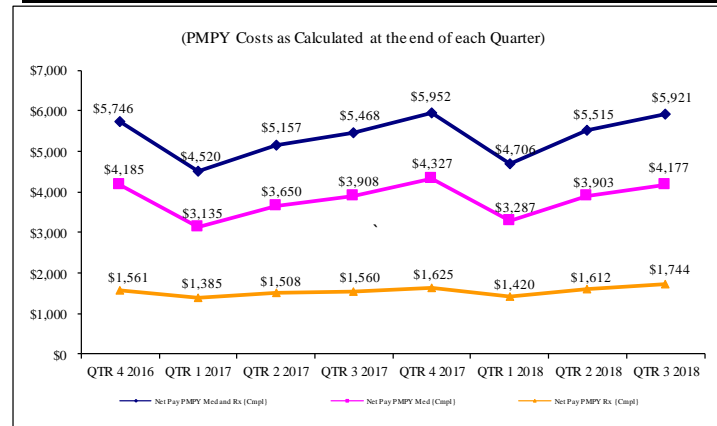
DASHBOARD REPORT: BASED ON INCURRED CLAIMS THROUGH SEPTEMBER 2018

Includes Projections for Incurred, but Not Yet Reported (IBNR)

Enrollment

| Fact | Oct 2016 - Sep 2017 | Oct 2017 - Sep 2018 | % Change |
|-------------------|---------------------|---------------------|----------|
| Employees Avg Med | 145,537 | 144,892 | -0.44% |
| Members Avg Med | 262,525 | 263,808 | 0.49% |
| Family Size Avg | 1.8 | 1.8 | 0.94% |
| Member Age Avg | 36.9 | 36.8 | -0.20% |

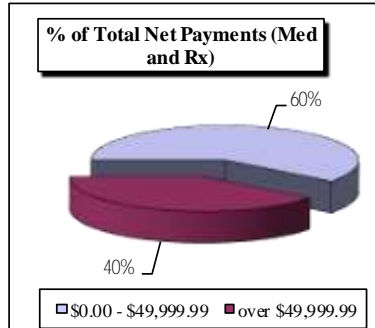
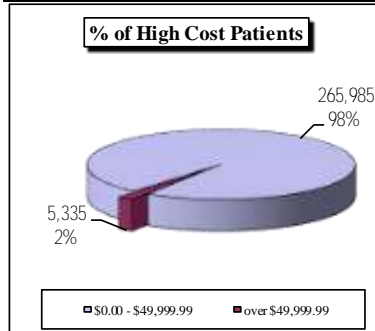
Net Incurred Claims Cost per Member



Allowed Claims Costs PMPY with Norms

| | Oct 2016 - Sep 2017 | Oct 2017 - Sep 2018 | % Change | Recent US Norm | Comp to Norm |
|----------------------------------|---------------------|---------------------|----------|----------------|--------------|
| Allow Amt PMPY Med {Cmpl} | \$4,528.50 | \$4,769.62 | 5% | \$4,912.04 | -2.99% |
| Allow Amt PMPY IP Acute {Cmpl} | \$1,301.92 | \$1,345.04 | 3% | N/A | N/A |
| Allow Amt PMPY OP Med {Cmpl} | \$3,214.70 | \$3,411.94 | 6% | \$3,462.48 | -1.48% |
| Allow Amt PMPY OP Fac Med {Cmpl} | \$1,772.56 | \$1,891.39 | 7% | N/A | N/A |
| Allow Amt PMPY Office Med {Cmpl} | \$933.77 | \$993.95 | 6% | N/A | N/A |
| Allow Amt PMPY OP Lab {Cmpl} | \$212.72 | \$221.98 | 4% | N/A | N/A |
| Allow Amt PMPY OP Rad {Cmpl} | \$446.69 | \$474.10 | 6% | N/A | N/A |
| Out of Pocket PMPY Med {Cmpl} | \$776.57 | \$812.29 | 5% | \$727.00 | 10.50% |
| Allow Amt PMPY Rx {Cmpl} | \$1,702.26 | \$1,811.39 | 6% | \$1,362.58 | 24.78% |
| Out of Pocket PMPY Rx {Cmpl} | \$196.85 | \$206.94 | 5% | \$0.00 | N/A |

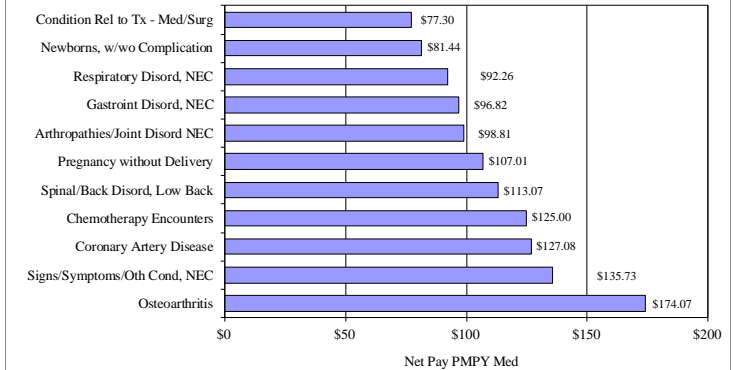
High Cost Claimants Oct 17—Sep 18



Prescription Drug Programs

| | Fact | Oct 2016 - Sep 2017 | Oct 2017 - Sep 2018 | % Change |
|------------|-------------------------------|---------------------|---------------------|----------|
| Mail Order | Discount Off AWP % Rx | 51.41% | 56.28% | 9.47% |
| | Scripts Generic Efficiency Rx | 96.55% | 97.39% | 0.87% |
| Retail | Discount Off AWP % Rx | 51.62% | 50.30% | -2.55% |
| | Scripts Generic Efficiency Rx | 97.31% | 97.31% | -0.01% |
| Total | Discount Off AWP % Rx | 51.55% | 52.35% | 1.54% |
| | Scripts Generic Efficiency Rx | 97.21% | 97.32% | 0.11% |
| | Scripts Maint Rx % Mail Order | 16.19% | 19.59% | 20.99% |

Top 10 Clinical Conditions



Cost Drivers Support

| Fact | Oct 2016 - Sep 2017 | Oct 2017 - Sep 2018 | % Change |
|--------------------------------|---------------------|---------------------|----------|
| Allow Amt Per Day Adm Acute | \$4,559.27 | \$4,918.21 | 7.87% |
| Days Per 1000 Adm Acute | 283.58 | 267.82 | -5.56% |
| Allow Amt Per Visit OP Fac Med | \$1,461.60 | \$1,498.94 | 2.55% |
| Visits Per 1000 OP Fac Med | 1,212.74 | 1,249.58 | 3.04% |
| Allow Amt Per Visit Office Med | \$118.78 | \$122.89 | 3.46% |
| Visits Per 1000 Office Med | 7,860.64 | 8,027.55 | 2.12% |
| Allow Amt Per Day Supply Rx | \$2.99 | \$3.10 | 3.86% |
| Days Supply PMPY Rx | 569.72 | 583.36 | 2.40% |

Cost Drivers—Utilization and Price Trends

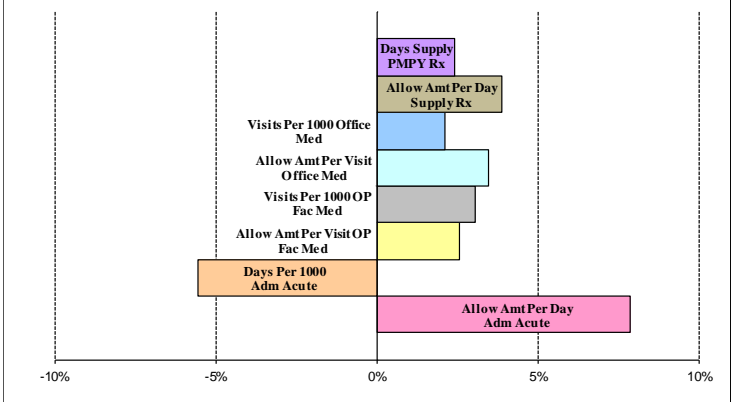


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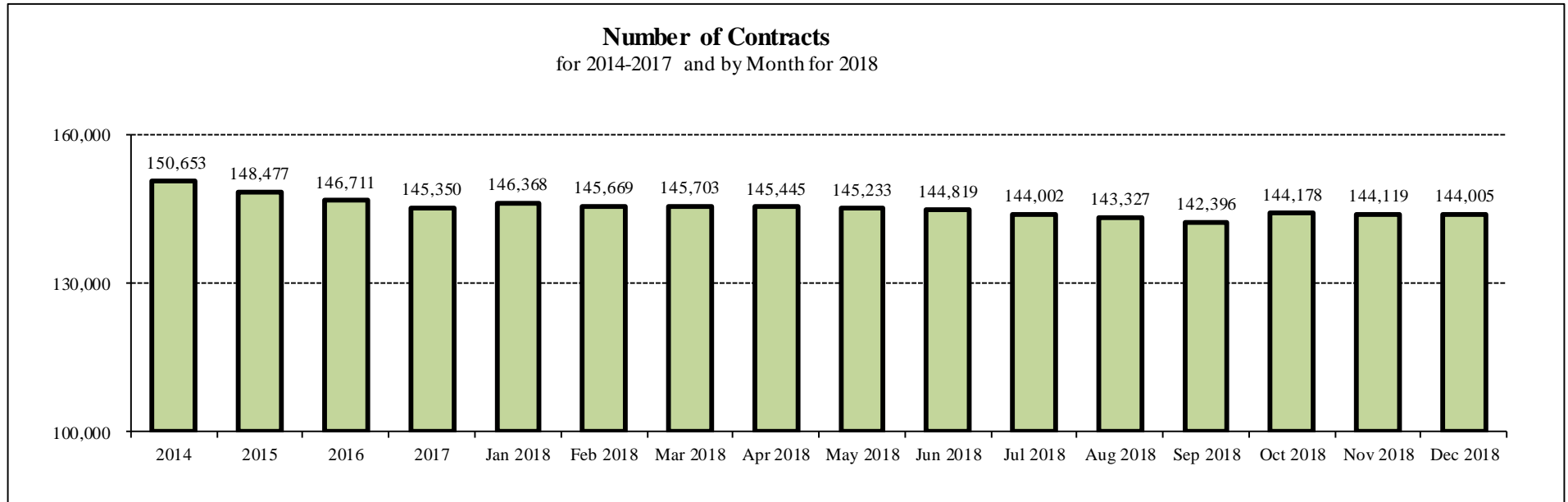
| | |
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Paid data as of: December 2018

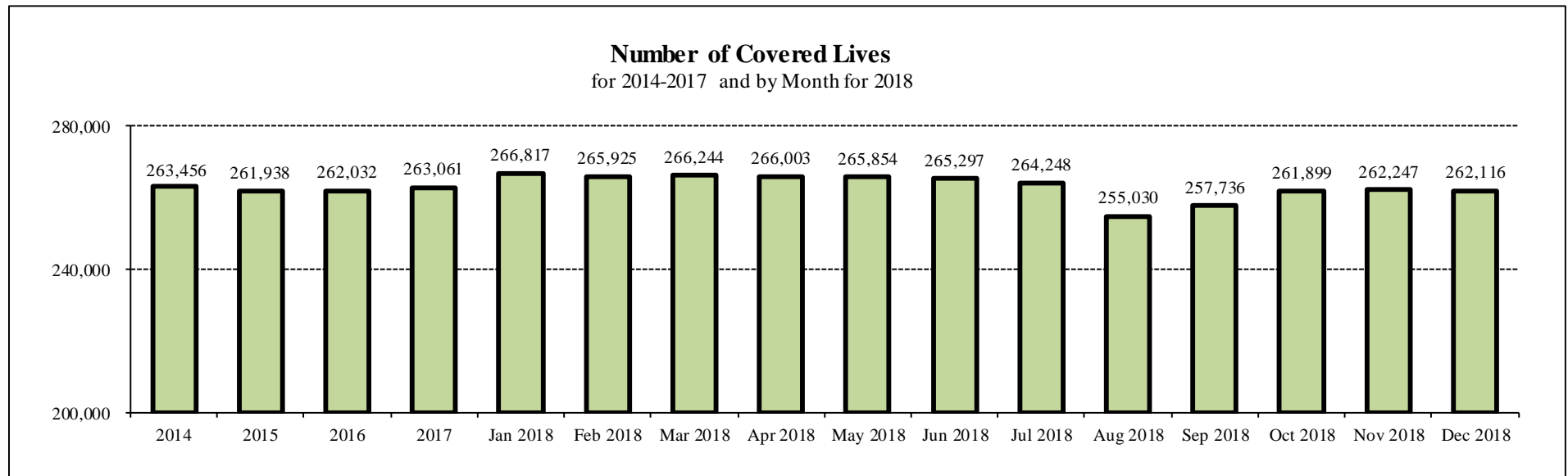
Incurred data as of: September 2018

Enrollment

The following chart shows planholder enrollment (contracts) for 2014-2017 and monthly year-to-date for 2018. Enrollment will fluctuate on a monthly basis. (Approximately 7,300 Cross-Reference spouses in any given month are not included.)

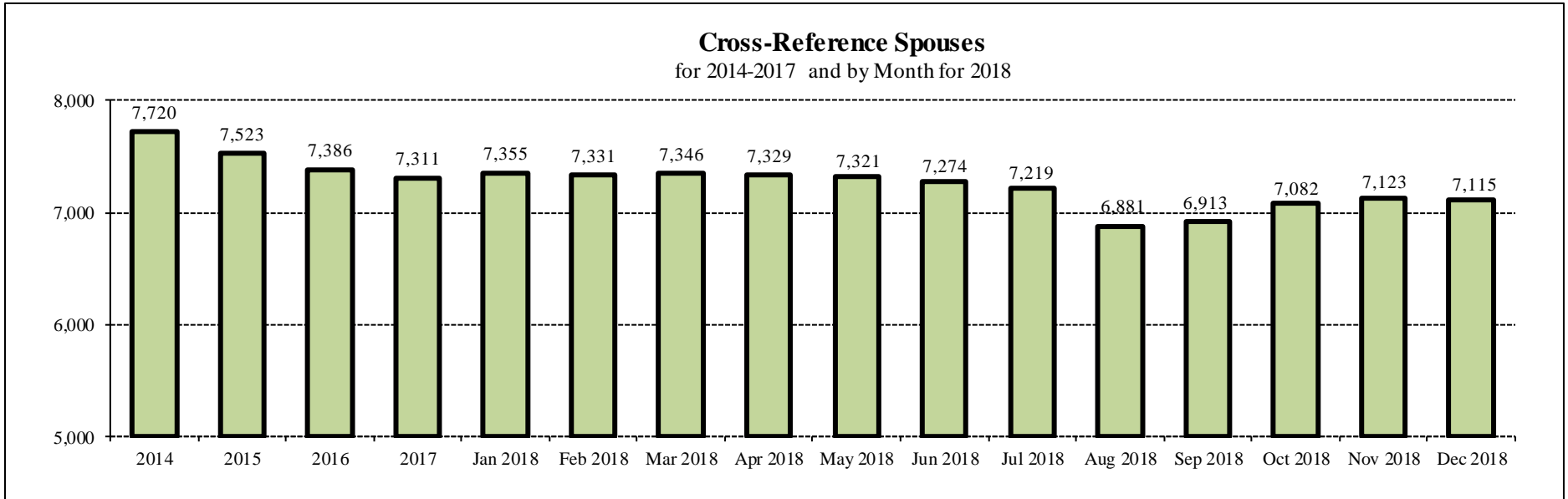


The following chart shows member enrollment (covered lives) for 2014-2017 and monthly year-to-date for 2018. Enrollment will fluctuate on a monthly basis.



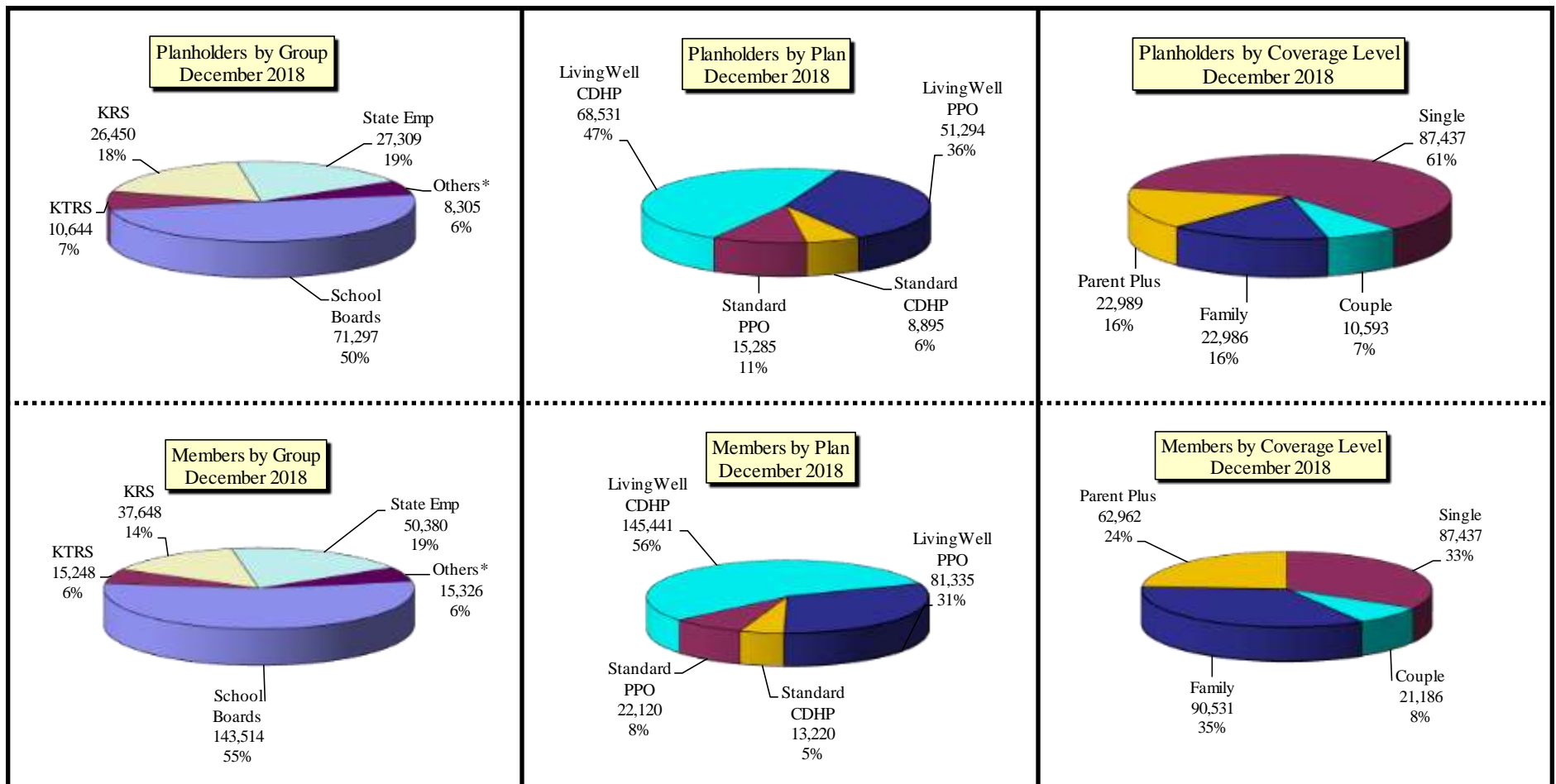
Enrollment *(continued)*

The following graph shows the number of Cross-Reference Spouses for 2014-2017 and monthly year-to-date for 2018. The number of Cross-Reference Spouses will fluctuate on a monthly basis.



Enrollment *(continued)*

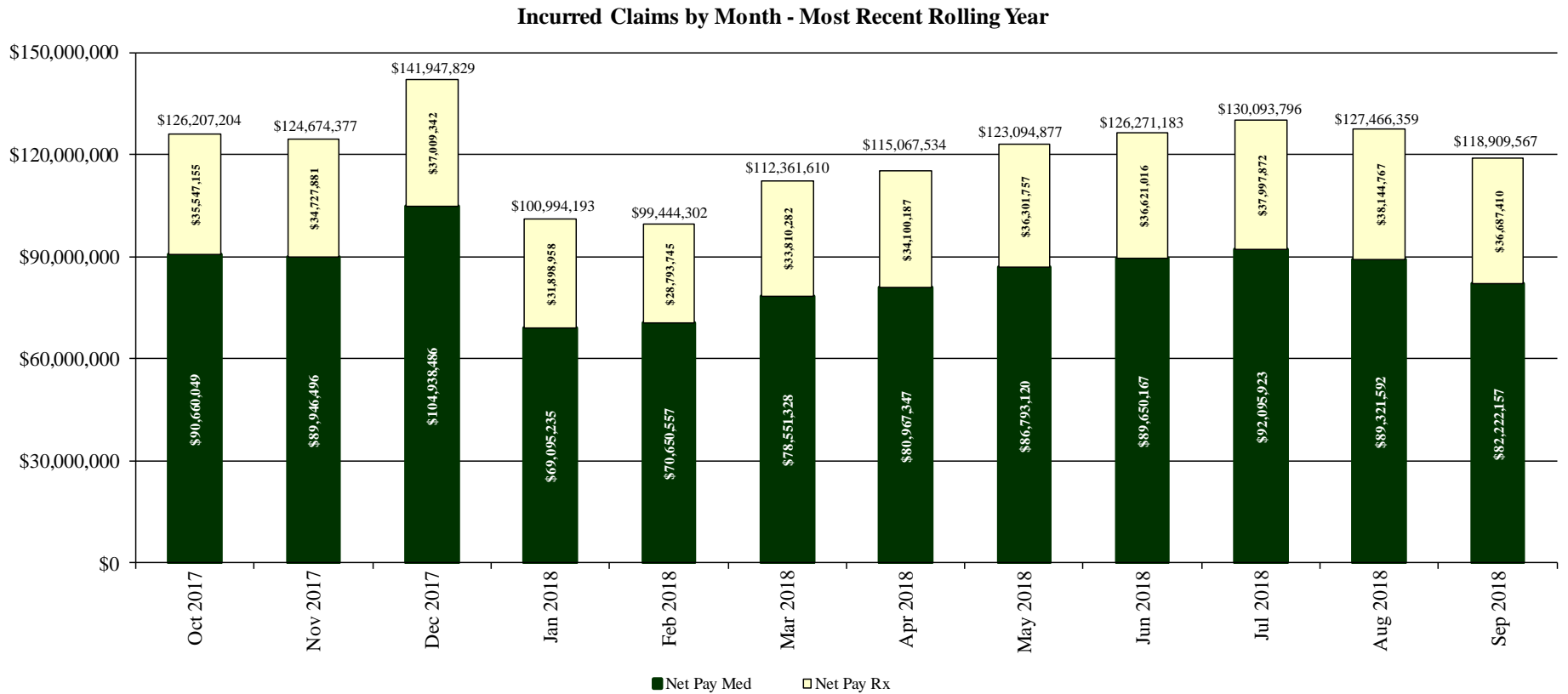
The following charts show Planholder and Member enrollment by Group, Health Plan, and Coverage Level.



* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs

Claims costs include Incurred Medical and Pharmacy (Rx) Claims Cost for the most recent rolling year.



Claims Costs *(continued)*

The following table represents Incurred Medical Claims by Group for 2014-2017 and monthly year-to-date for 2018.

| INCURRED MEDICAL CLAIMS BY GROUP | | | | | | |
|---|----------------------|---------------|---------------|------------------------|---------------|-----------------|
| Time Period | School Boards | KTRS | KRS | State Employees | Others | Totals |
| 2014 | \$465,112,511 | \$121,029,097 | \$216,483,334 | \$202,992,249 | \$80,366,825 | \$1,085,984,016 |
| 2015 | \$406,274,265 | \$100,740,841 | \$189,171,718 | \$159,515,036 | \$62,699,633 | \$918,401,495 |
| 2016 | \$434,598,836 | \$101,148,928 | \$194,829,584 | \$171,803,146 | \$61,200,271 | \$963,580,765 |
| 2017 | \$453,602,601 | \$95,619,018 | \$197,995,114 | \$176,914,511 | \$63,438,496 | \$987,569,740 |
| Jan 2018 | \$31,488,918 | \$6,889,976 | \$15,262,287 | \$10,723,380 | \$4,730,674 | \$69,095,235 |
| Feb 2018 | \$31,231,807 | \$7,274,463 | \$14,572,714 | \$12,076,766 | \$5,494,807 | \$70,650,557 |
| Mar 2018 | \$36,176,580 | \$7,492,597 | \$15,960,880 | \$13,541,445 | \$5,379,826 | \$78,551,328 |
| Apr 2018 | \$38,033,754 | \$7,792,741 | \$15,975,489 | \$14,374,373 | \$4,790,990 | \$80,967,347 |
| May 2018 | \$40,378,933 | \$8,235,178 | \$18,729,583 | \$13,938,893 | \$5,510,533 | \$86,793,120 |
| Jun 2018 | \$45,970,469 | \$7,701,237 | \$16,439,273 | \$14,111,245 | \$5,427,943 | \$89,650,167 |
| Jul 2018 | \$44,407,745 | \$7,730,216 | \$18,004,957 | \$15,729,862 | \$6,223,144 | \$92,095,923 |
| Aug 2018 | \$40,307,464 | \$8,854,018 | \$17,726,831 | \$16,914,516 | \$5,518,764 | \$89,321,592 |
| Sep 2018 | \$34,974,452 | \$7,737,390 | \$18,764,799 | \$16,083,610 | \$4,661,906 | \$82,222,157 |

* Others include COBRA, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs *(continued)*

The following table represents Incurred Pharmacy Claims by Group for 2014-2017 and monthly year-to-date for 2018.

| INCURRED RX CLAIMS BY GROUP | | | | | | |
|-----------------------------|---------------|--------------|--------------|-----------------|--------------|---------------|
| Time Period | School Boards | KTRS | KRS | State Employees | Others* | Totals |
| 2014 | \$131,098,426 | \$43,053,078 | \$73,830,755 | \$55,751,835 | \$20,884,223 | \$324,618,317 |
| 2015 | \$128,985,096 | \$42,244,335 | \$74,179,491 | \$56,345,078 | \$21,644,747 | \$323,398,746 |
| 2016 | \$150,193,862 | \$44,005,444 | \$82,316,646 | \$62,094,031 | \$23,921,860 | \$362,531,844 |
| 2017 | \$169,403,089 | \$46,568,665 | \$89,282,878 | \$68,683,707 | \$25,693,637 | \$399,631,976 |
| Jan 2018 | \$13,589,582 | \$3,543,771 | \$7,484,541 | \$5,148,254 | \$2,132,810 | \$31,898,958 |
| Feb 2018 | \$12,378,207 | \$3,145,294 | \$6,628,248 | \$4,902,156 | \$1,739,840 | \$28,793,745 |
| Mar 2018 | \$14,728,979 | \$3,596,193 | \$7,575,229 | \$5,819,495 | \$2,090,386 | \$33,810,282 |
| Apr 2018 | \$14,912,703 | \$3,566,842 | \$7,860,870 | \$5,684,806 | \$2,074,966 | \$34,100,187 |
| May 2018 | \$15,482,073 | \$4,209,463 | \$7,847,734 | \$6,414,715 | \$2,347,773 | \$36,301,757 |
| Jun 2018 | \$16,150,659 | \$3,927,738 | \$8,065,271 | \$5,868,107 | \$2,609,241 | \$36,621,016 |
| Jul 2018 | \$16,624,838 | \$4,225,294 | \$8,387,361 | \$6,463,781 | \$2,296,598 | \$37,997,872 |
| Aug 2018 | \$16,340,633 | \$4,347,761 | \$8,465,190 | \$6,578,096 | \$2,413,087 | \$38,144,767 |
| Sep 2018 | \$15,555,172 | \$4,161,550 | \$8,554,471 | \$6,106,761 | \$2,309,456 | \$36,687,410 |

* Others include COBRA, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs *(continued)*

The following table represents Incurred Medical Claims by Health Plan for 2014-2017 and monthly year-to-date for 2018.

| INCURRED MEDICAL CLAIMS BY PLAN | | | | | | | |
|---------------------------------|--------------|---------------|----------------|-----------------|----------|-------------|-----------------|
| Time Period | Standard PPO | Standard CDHP | LivingWell PPO | LivingWell CDHP | Other* | Missing** | Total |
| 2014 | \$57,385,008 | \$46,095,825 | \$598,724,084 | \$375,470,631 | \$92,820 | \$8,215,648 | \$1,085,986,030 |
| 2015 | \$44,667,793 | \$42,933,513 | \$448,976,661 | \$376,288,350 | \$0 | \$8,215,648 | \$921,081,965 |
| 2016 | \$53,523,467 | \$48,589,204 | \$446,510,072 | \$408,115,361 | \$0 | \$6,842,661 | \$963,580,765 |
| 2017 | \$66,571,315 | \$30,725,291 | \$411,559,910 | \$470,753,763 | \$0 | \$7,959,462 | \$987,569,740 |
| Jan 2018 | \$6,951,067 | \$1,564,481 | \$28,572,034 | \$31,112,177 | \$0 | \$895,476 | \$69,095,235 |
| Feb 2018 | \$5,658,251 | \$1,479,744 | \$30,284,005 | \$32,658,659 | \$0 | \$569,898 | \$70,650,557 |
| Mar 2018 | \$7,088,541 | \$2,113,895 | \$30,357,036 | \$38,605,218 | \$0 | \$386,638 | \$78,551,328 |
| Apr 2018 | \$6,849,800 | \$1,787,843 | \$30,914,215 | \$40,960,740 | \$0 | \$454,749 | \$80,967,347 |
| May 2018 | \$6,549,976 | \$2,584,866 | \$35,090,031 | \$41,745,278 | \$0 | \$822,969 | \$86,793,120 |
| Jun 2018 | \$6,912,531 | \$2,445,157 | \$34,319,431 | \$45,448,602 | \$0 | \$524,447 | \$89,650,167 |
| Jul 2018 | \$8,126,791 | \$2,304,305 | \$34,687,325 | \$45,769,291 | \$0 | \$1,208,211 | \$92,095,923 |
| Aug 2018 | \$6,874,156 | \$2,643,854 | \$33,977,748 | \$45,423,882 | \$0 | \$401,952 | \$89,321,592 |
| Sep 2018 | \$7,345,878 | \$2,046,499 | \$33,316,821 | \$39,182,043 | \$0 | \$330,916 | \$82,222,157 |

* Other means claim from old plan reported as incurred in following year..

**Missing means the claims could not be tagged to a specific Health Plan.

Claims Costs *(continued)*

The following table represents Incurred Pharmacy Claims by Health Plan for 2014-2017 and monthly year-to-date for 2018.

| INCURRED RX CLAIMS BY PLAN | | | | | | | |
|----------------------------|--------------|---------------|----------------|-----------------|----------|-----------|---------------|
| Time Period | Standard PPO | Standard CDHP | LivingWell PPO | LivingWell CDHP | Other* | Missing** | Total |
| 2014 | \$17,730,754 | \$5,829,739 | \$217,764,345 | \$82,940,511 | \$39,794 | \$313,173 | \$324,618,317 |
| 2015 | \$16,014,926 | \$6,904,578 | \$201,586,203 | \$98,816,804 | \$0 | \$76,235 | \$323,398,746 |
| 2016 | \$19,014,651 | \$7,491,440 | \$216,158,709 | \$119,656,922 | \$0 | \$210,122 | \$362,531,844 |
| 2017 | \$22,796,437 | \$4,758,793 | \$217,201,158 | \$154,776,369 | \$0 | \$99,219 | \$399,631,976 |
| Jan 2018 | \$2,941,545 | \$315,131 | \$17,988,747 | \$10,645,567 | \$0 | \$7,968 | \$31,898,958 |
| Feb 2018 | \$2,456,753 | \$260,260 | \$15,755,486 | \$10,301,930 | \$0 | \$19,315 | \$28,793,745 |
| Mar 2018 | \$2,600,202 | \$414,836 | \$18,134,022 | \$12,653,356 | \$0 | \$7,867 | \$33,810,282 |
| Apr 2018 | \$2,606,840 | \$397,607 | \$17,563,140 | \$13,530,813 | \$0 | \$1,786 | \$34,100,187 |
| May 2018 | \$2,784,644 | \$424,363 | \$18,495,637 | \$14,594,712 | \$0 | \$2,402 | \$36,301,757 |
| Jun 2018 | \$2,490,060 | \$439,826 | \$18,622,714 | \$15,065,977 | \$0 | \$2,439 | \$36,621,016 |
| Jul 2018 | \$2,853,162 | \$385,685 | \$18,792,925 | \$15,962,911 | \$0 | \$3,190 | \$37,997,872 |
| Aug 2018 | \$2,696,224 | \$462,474 | \$18,624,805 | \$16,354,970 | \$0 | \$6,294 | \$38,144,767 |
| Sep 2018 | \$2,631,568 | \$441,482 | \$17,731,846 | \$15,874,353 | \$0 | \$8,161 | \$36,687,410 |

* Other means claim from old plan reported as incurred in following year..

**Missing means the claims could not be tagged to a specific Health Plan.

Claims Costs *(continued)*

The following represents Incurred Medical Claims by Coverage Level for 2014-2017 and monthly year-to-date for 2018.

| INCURRED MEDICAL CLAIMS BY COVERAGE LEVEL | | | | | | |
|--|---------------|---------------|--------------------|---------------|-----------------|-----------------|
| Time Period | Couple | Family | Parent Plus | Single | Unknown* | Total |
| 2014 | \$131,271,014 | \$239,094,807 | \$182,552,523 | \$524,850,024 | \$8,215,648 | \$1,085,984,016 |
| 2015 | \$113,343,648 | \$214,227,846 | \$156,724,117 | \$428,570,705 | \$5,535,178 | \$918,401,495 |
| 2016 | \$115,925,194 | \$233,308,248 | \$157,524,980 | \$449,979,682 | \$6,842,661 | \$963,580,765 |
| 2017 | \$125,296,363 | \$251,636,429 | \$159,033,995 | \$443,643,492 | \$7,959,462 | \$987,569,740 |
| Jan 2018 | \$9,311,332 | \$17,253,824 | \$11,224,345 | \$30,410,257 | \$895,476 | \$69,095,235 |
| Feb 2018 | \$9,051,266 | \$17,556,279 | \$12,087,751 | \$31,385,363 | \$569,898 | \$70,650,557 |
| Mar 2018 | \$9,507,916 | \$21,363,063 | \$12,880,926 | \$34,412,785 | \$386,638 | \$78,551,328 |
| Apr 2018 | \$10,869,506 | \$21,900,581 | \$12,577,776 | \$35,164,735 | \$454,749 | \$80,967,347 |
| May 2018 | \$11,491,559 | \$21,466,193 | \$12,726,745 | \$40,285,654 | \$822,969 | \$86,793,120 |
| Jun 2018 | \$10,935,005 | \$22,577,840 | \$15,151,726 | \$40,461,149 | \$524,447 | \$89,650,167 |
| Jul 2018 | \$12,058,265 | \$23,804,322 | \$15,369,526 | \$39,655,600 | \$1,208,211 | \$92,095,923 |
| Aug 2018 | \$11,952,865 | \$21,888,451 | \$14,444,010 | \$40,634,314 | \$401,952 | \$89,321,592 |
| Sep 2018 | \$10,023,639 | \$20,968,946 | \$12,580,948 | \$38,317,709 | \$330,916 | \$82,222,157 |

**Unable to tag claims to a specific coverage level*

Claims Costs *(continued)*

The following represents Incurred Pharmacy Claims by Coverage Level for 2014-2017 and monthly year-to-date for 2018.

| INCURRED RX CLAIMS BY COVERAGE LEVEL | | | | | | |
|---|---------------|---------------|--------------------|---------------|-----------------|---------------|
| Time Period | Couple | Family | Parent Plus | Single | Unknown* | Total |
| 2014 | \$45,477,497 | \$67,741,378 | \$45,635,023 | \$165,451,246 | \$313,173 | \$324,618,317 |
| 2015 | \$42,957,491 | \$68,806,053 | \$45,211,695 | \$166,347,272 | \$76,235 | \$323,398,746 |
| 2016 | \$48,058,037 | \$80,366,021 | \$49,750,946 | \$184,146,718 | \$210,122 | \$362,531,844 |
| 2017 | \$52,793,512 | \$92,088,283 | \$55,329,543 | \$199,321,419 | \$99,219 | \$399,631,976 |
| Jan 2018 | \$3,800,472 | \$7,602,206 | \$4,424,398 | \$16,063,915 | \$7,968 | \$31,898,958 |
| Feb 2018 | \$3,747,421 | \$6,650,888 | \$4,193,876 | \$14,182,245 | \$19,315 | \$28,793,745 |
| Mar 2018 | \$4,328,101 | \$7,887,882 | \$4,464,714 | \$17,121,719 | \$7,867 | \$33,810,282 |
| Apr 2018 | \$4,199,540 | \$8,042,065 | \$4,796,191 | \$17,060,605 | \$1,786 | \$34,100,187 |
| May 2018 | \$4,786,792 | \$8,313,483 | \$5,166,081 | \$18,033,000 | \$2,402 | \$36,301,757 |
| Jun 2018 | \$4,697,250 | \$8,568,410 | \$5,081,615 | \$18,271,303 | \$2,439 | \$36,621,016 |
| Jul 2018 | \$4,691,334 | \$9,253,888 | \$5,559,456 | \$18,490,004 | \$3,190 | \$37,997,872 |
| Aug 2018 | \$4,700,128 | \$8,944,999 | \$5,230,663 | \$19,262,683 | \$6,294 | \$38,144,767 |
| Sep 2018 | \$4,787,384 | \$8,673,777 | \$4,874,723 | \$18,343,366 | \$8,161 | \$36,687,410 |

**Unable to tag claims to a specific coverage level*

Medical Claims Utilization

The following is based on Incurred Medical Claims* from Jan-Sep 2018.

| Plan | Admits Per 1000 Acute | Admits Per 1000 Acute Rcnt SGovt | % Diff from Rcnt SGovt | Days LOS per Admit Acute | Days LOS per Admit Acute Rcnt SGovt | % Diff from Rcnt SGovt | Days Per 1000 Admits Acute | Days Per 1000 Admits Acute Rcnt SGovt | % Diff from Rcnt SGovt |
|-----------------|-----------------------|----------------------------------|------------------------|--------------------------|-------------------------------------|------------------------|----------------------------|---------------------------------------|------------------------|
| LivingWell CDHP | 57.55 | 56.50 | 1.86% | 3.96 | 4.13 | -4.09% | 227.84 | 250.92 | -9.20% |
| LivingWell PPO | 63.67 | 59.19 | 7.57% | 4.60 | 4.70 | -1.98% | 293.09 | 275.53 | 6.37% |
| Standard CDHP | 35.18 | 55.16 | -36.22% | 4.78 | 4.92 | -2.75% | 168.24 | 241.46 | -30.32% |
| Standard PPO | 62.34 | 59.33 | 5.08% | 4.79 | 4.86 | -1.40% | 298.44 | 270.15 | 10.47% |
| Average | 58.79 | 57.53 | 2.19% | 4.28 | 4.41 | -3.00% | 251.65 | 259.91 | -3.18% |

| Plan | Visits Per 1000 Office | Visits Per 1000 Office Rcnt US | % Diff from Rcnt US | Visits Per 1000 ER | Visits Per 1000 ER Rcnt US | % Diff from Rcnt US |
|-----------------|------------------------|--------------------------------|---------------------|--------------------|----------------------------|---------------------|
| LivingWell CDHP | 7,747.94 | 6,653.41 | 14.13% | 178.50 | 230.64 | -29.21% |
| LivingWell PPO | 9,288.77 | 7,420.10 | 20.12% | 203.56 | 232.68 | -14.31% |
| Standard CDHP | 4,507.04 | 6,568.59 | -45.74% | 168.55 | 232.19 | -37.76% |
| Standard PPO | 5,964.09 | 7,005.60 | -17.46% | 236.51 | 232.40 | 1.73% |
| Average | 7,913.55 | 6,921.83 | 12.53% | 191.02 | 231.51 | -21.20% |

Notes:

Rcnt SGovt—Recent State Government

Rcnt US—Recent US

LOS—Length of Stay

OP—Outpatient

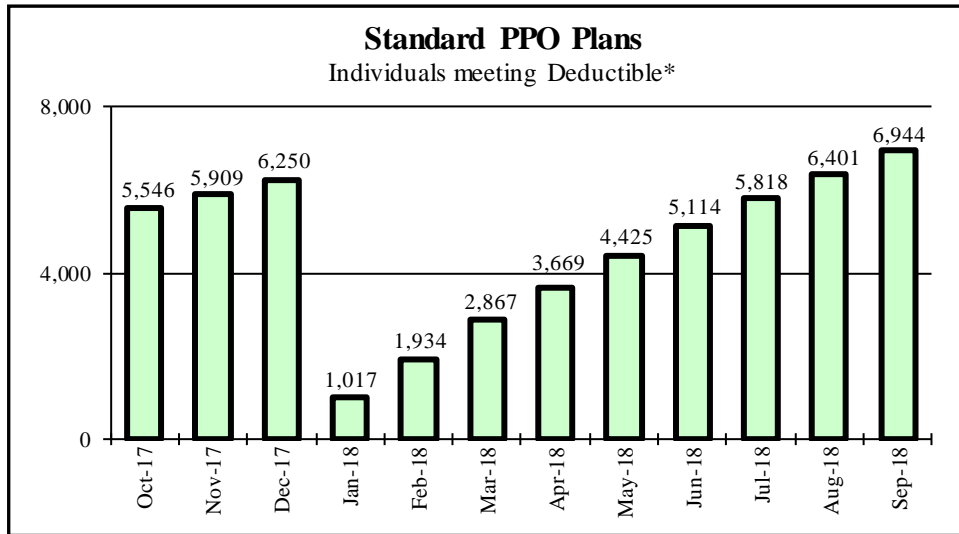
OP Rad—Outpatient Radiology

| Plan | Svcs Per 1000 OP Lab | Svcs Per 1000 OP Lab Rcnt US | % Diff from Rcnt US | Svcs Per 1000 OP Rad | Svcs Per 1000 OP Rad Rcnt US | %Diff from Rcnt US |
|-----------------|----------------------|------------------------------|---------------------|----------------------|------------------------------|--------------------|
| LivingWell CDHP | 8,143.79 | 7,852.75 | 3.71% | 2,158.68 | 2,040.67 | 5.78% |
| LivingWell PPO | 10,667.99 | 9,113.08 | 17.06% | 2,924.99 | 2,576.14 | 13.54% |
| Standard CDHP | 5,455.10 | 8,119.59 | -32.82% | 1,485.22 | 2,084.86 | -28.76% |
| Standard PPO | 7,908.66 | 8,789.20 | -10.02% | 2,108.81 | 2,306.35 | -8.57% |
| Average | 8,783.08 | 8,345.88 | 5.24% | 2,361.74 | 2,235.02 | 5.67% |

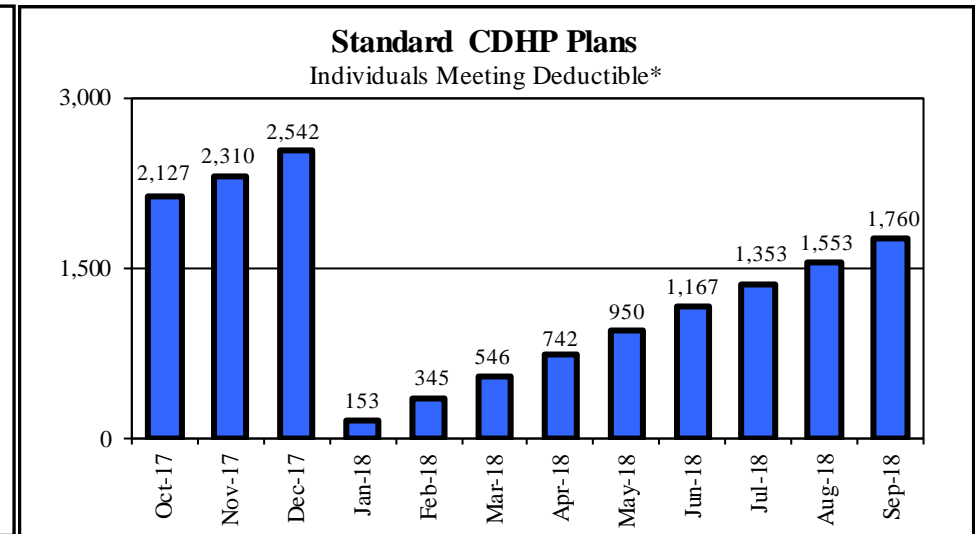
*Services are tracked by each service, not by each visit. Therefore, if two laboratory services are performed at one visit, it will count as two services.

Analysis of Individuals and Families Meeting Their Deductibles

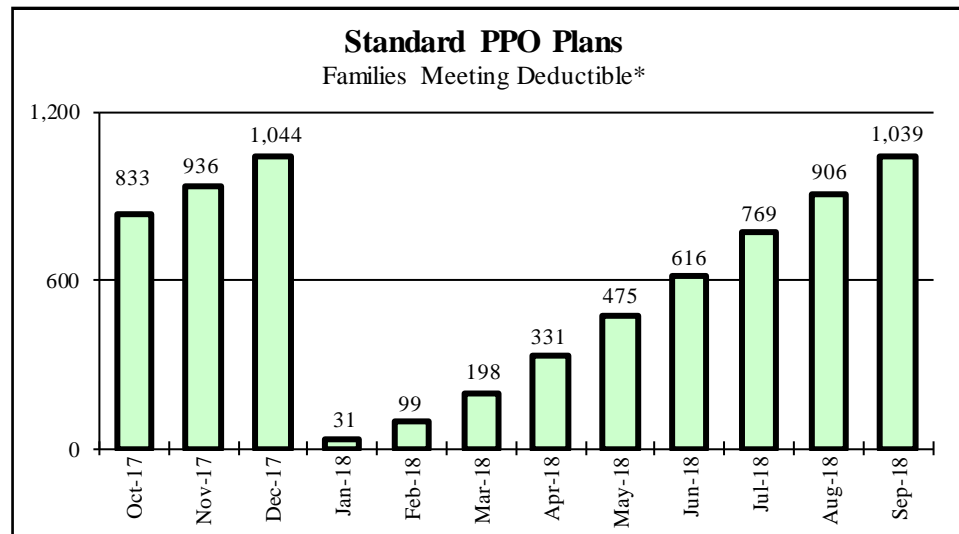
The following details the number of individuals and families by Health Plan that met their deductible for the latest rolling year. This report is based on Incurred Medical and Pharmacy Claims.



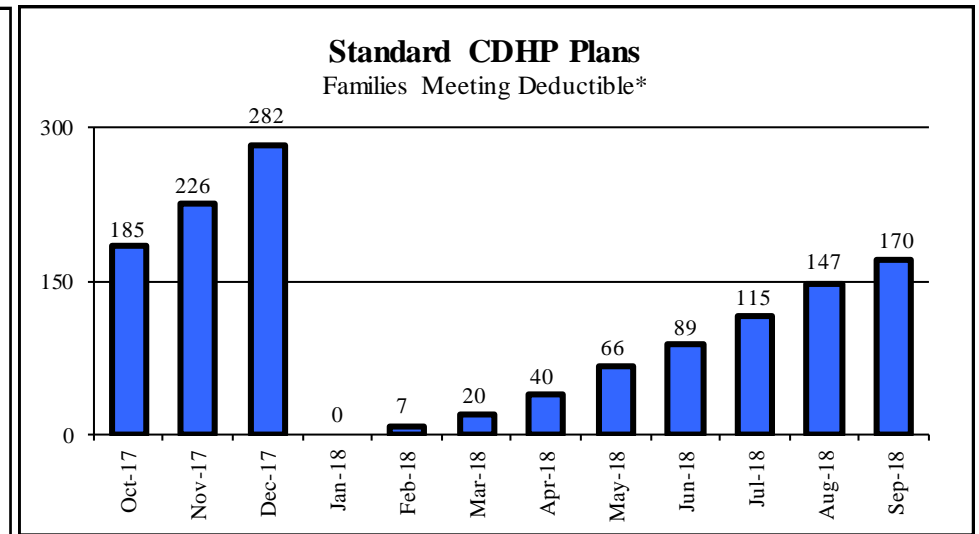
* 2017 and 2018 Individual Deductible is \$750



* 2017 and 2018 Individual Deductible is \$1,750



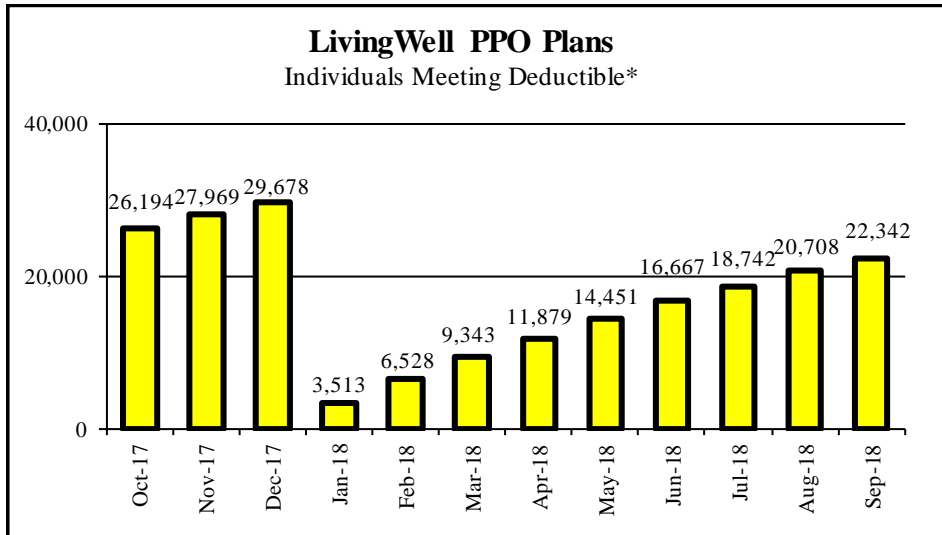
* 2017 and 2018 Family Deductible is \$1,500



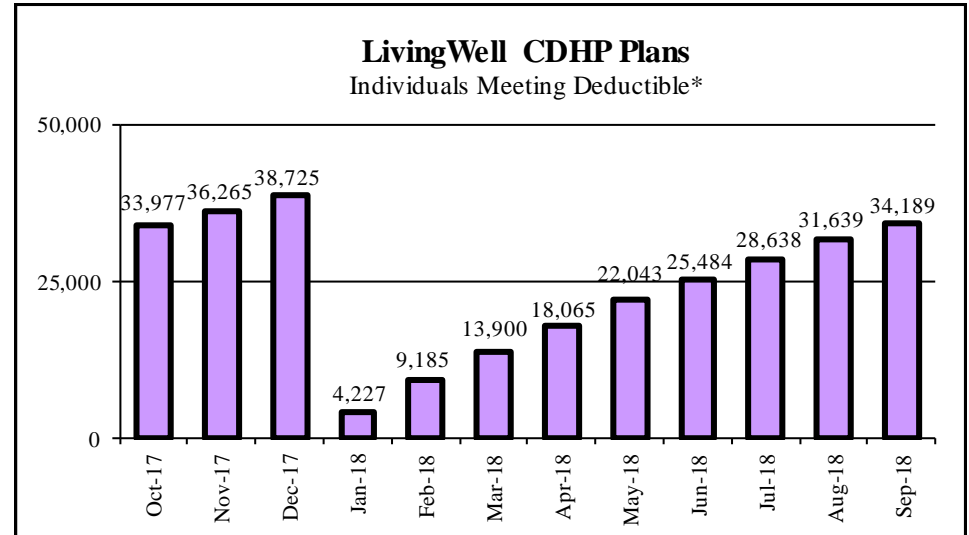
* 2017 and 2018 Family Deductible is \$3,500

Analysis of Individuals and Families Meeting Their Deductibles *(continued)*

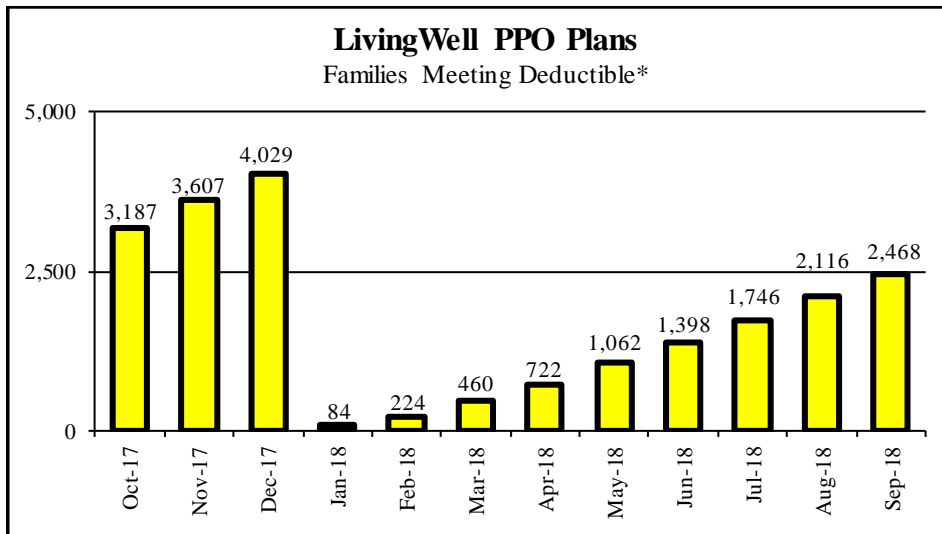
The following details the number of individuals and families by Health Plan that met their deductible for the latest rolling year. This report is based on Incurred Medical and Pharmacy Claims.



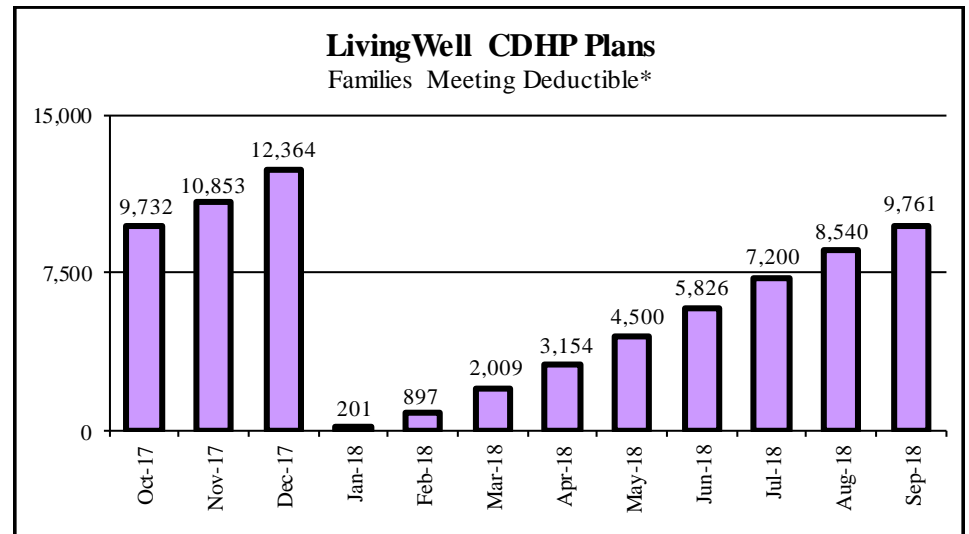
*2017 and 2018 Individual Deductible is \$750



* 2017 and 2018 Individual Deductible is \$1,250



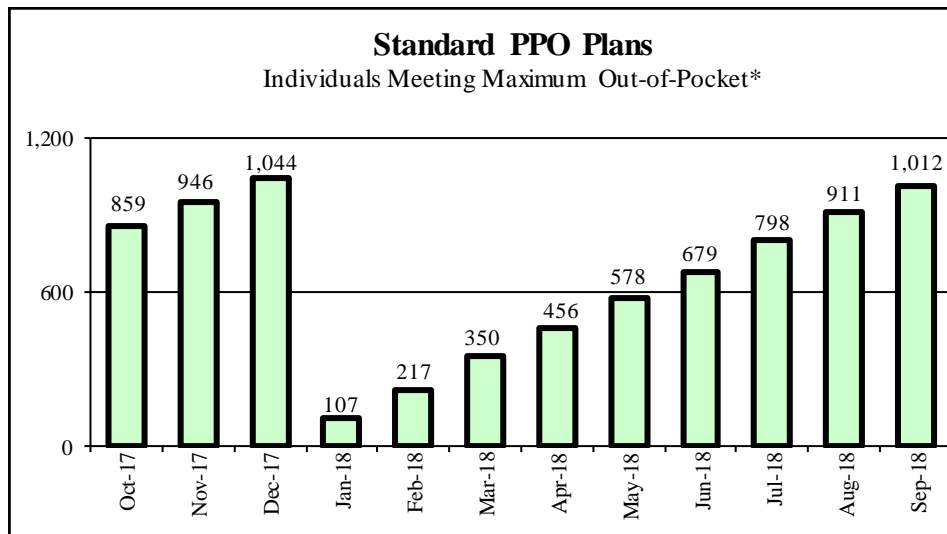
* 2017 and 2018 Family Deductible is \$1,500



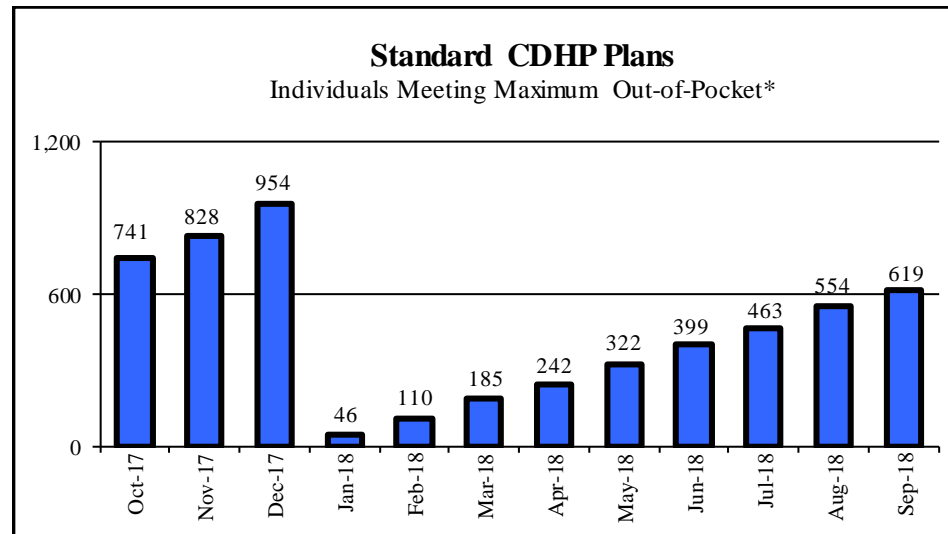
* 2017 and 2018 Family Deductible is \$2,500

Analysis of Individuals and Families Meeting Their Maximum Out-of-Pocket Expenses

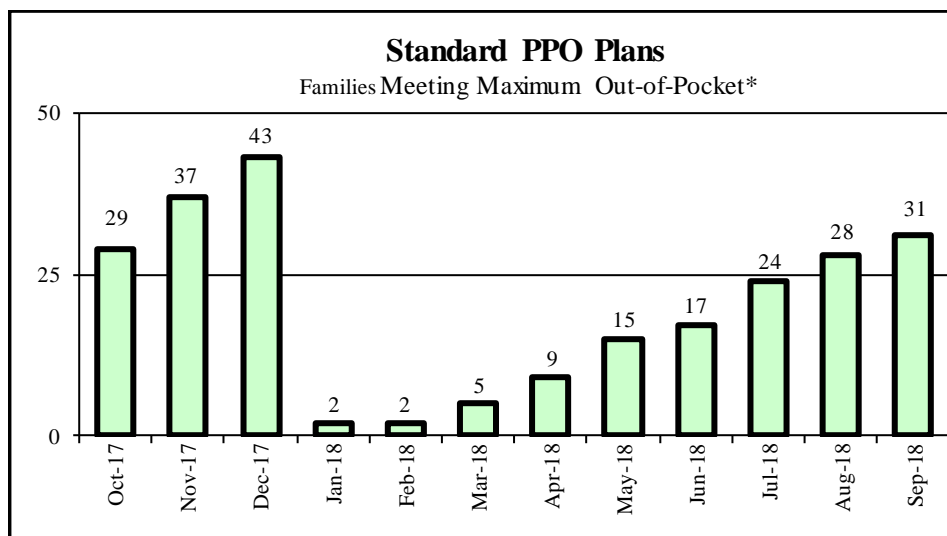
The following details the number of individuals and families by Health Plan that met their maximum out-of-pocket expense for the latest rolling year. This report is based on Incurred Medical and Pharmacy claims.



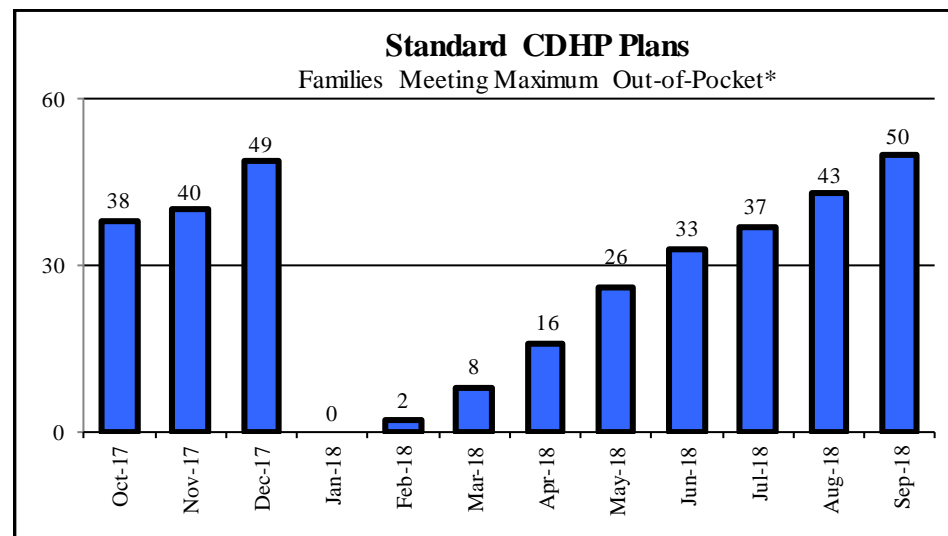
* 2017 and 2018 Individual Maximum Out of Pocket is \$3,750



* 2017 and 2018 Individual Maximum Out of Pocket is \$3,750



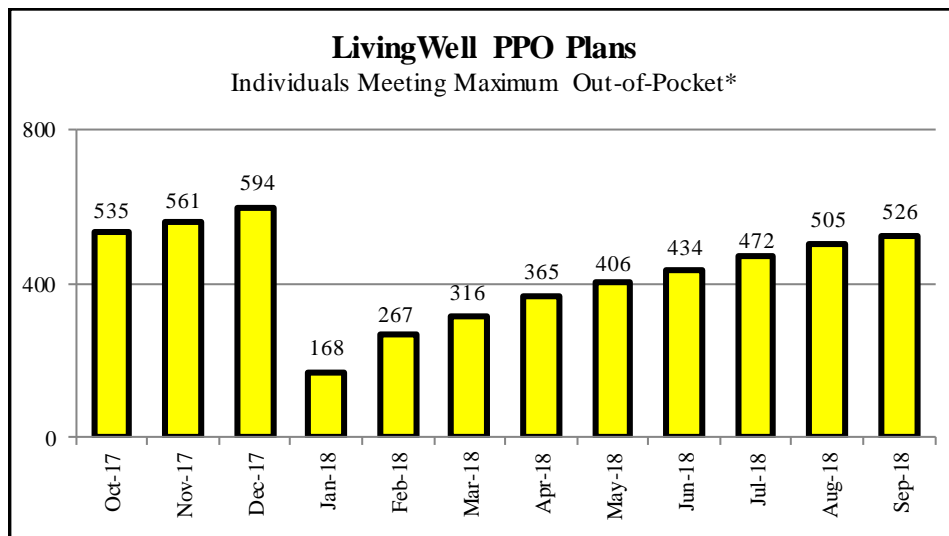
* 2017 and 2018 Family Maximum Out of Pocket is \$7,500



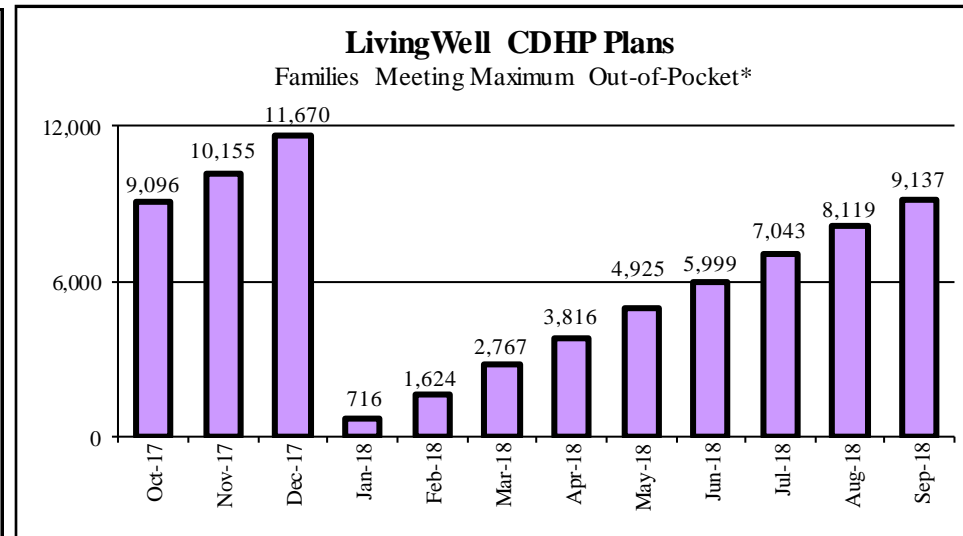
* 2017 and 2018 Family Maximum Out of Pocket is \$7,500

Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses (continued)

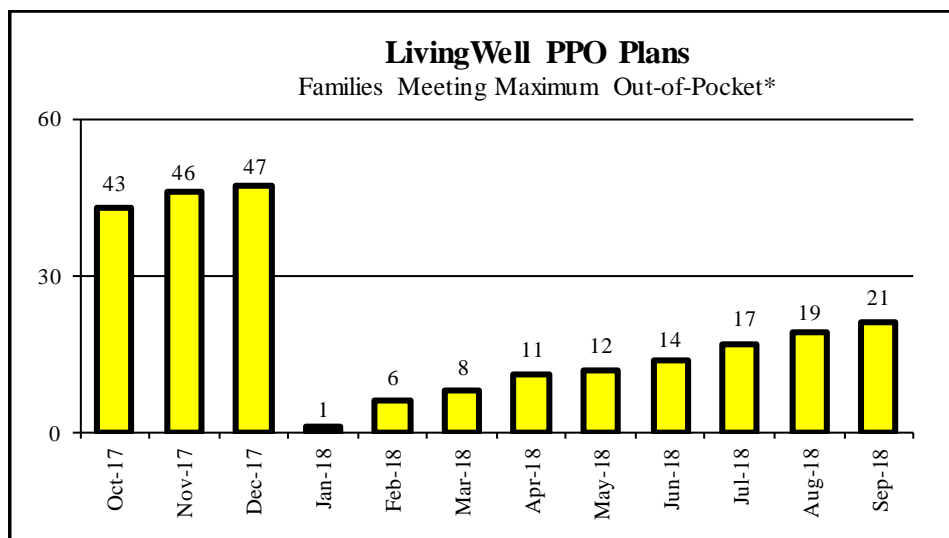
The following details the number of individuals and families by Health Plan that met their maximum out of pocket expense for the latest rolling year. This report is based on Incurred Medical and Pharmacy claims.



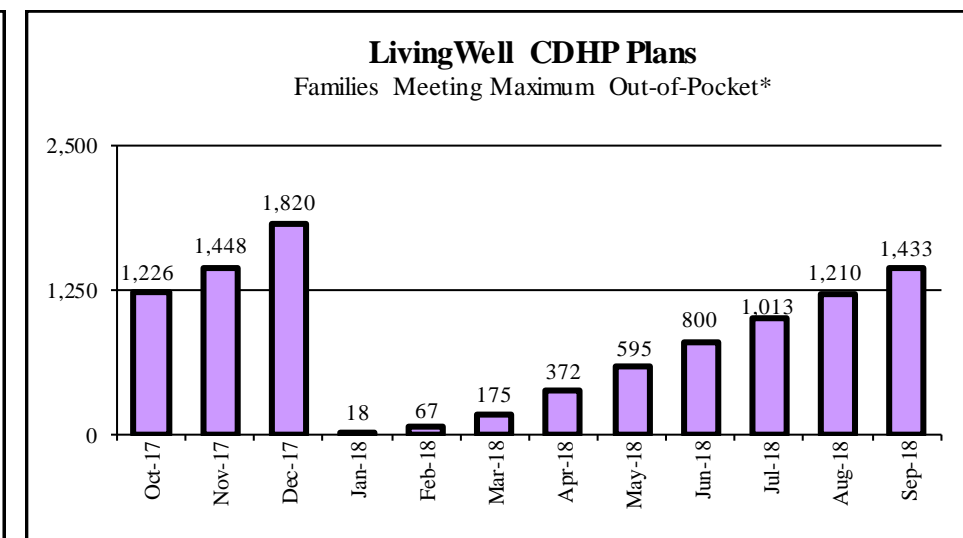
* 2017 and 2018 Individual Maximum Out of Pocket is \$2,750



* 2017 and 2018 Individual Maximum Out of Pocket is \$2,750



* 2017 and 2018 Family Maximum Out of Pocket is \$5,500



* 2017 and 2018 Family Maximum Out of Pocket is \$5,500

Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out-of-Pocket Expenses

The following details the number of individuals and families by Health Plan that met their deductibles and/or maximum out-of-pocket (MOOP) expense for the years 2014-2018 This report is based on Incurred Medical and Pharmacy claims.

| Individuals and Families in Standard PPO (2014—Present) | | | | | | | | | |
|--|------------------|--------------------|---------------------------|-------------|---------------------|-------------------|---------------------------|-------------|---------------------|
| | | Individuals | | | | Families | | | |
| Plan year | Plan Name | Deductible | Meeting Deductible | MOOP | Meeting MOOP | Deductible | Meeting Deductible | MOOP | Meeting MOOP |
| 2014 | Standard PPO | \$750 | 34.91% | \$3,500 | 6.82% | \$1,500 | 10.68% | \$7,000 | 0.82% |
| 2015 | Standard PPO | \$750 | 33.28% | \$3,500 | 5.31% | \$1,500 | 9.53% | \$7,000 | 0.30% |
| 2016 | Standard PPO | \$750 | 34.21% | \$3,500 | 5.85% | \$1,500 | 10.07% | \$7,000 | 0.39% |
| 2017 | Standard PPO | \$750 | 34.97% | \$3,750 | 5.84% | \$1,500 | 7.06% | \$7,500 | 0.29% |
| 2018 | Standard PPO | \$750 | 29.73% | \$3,750 | 4.33% | \$1,500 | 5.66% | \$7,500 | 0.17% |

| Individuals and Families in Standard CDHP (2014—Present) | | | | | | | | | |
|---|------------------|--------------------|----------------------------|-------------|---------------------|-------------------|----------------------------|-------------|---------------------|
| | | Individuals | | | | Families | | | |
| Plan year | Plan Name | Deductible | Meeting De-ductible | MOOP | Meeting MOOP | Deductible | Meeting De-ductible | MOOP | Meeting MOOP |
| 2014 | Standard CDHP | \$1,750 | 20.45% | \$3,500 | 7.38% | \$3,500 | 2.41% | \$7,000 | 0.47% |
| 2015 | Standard CDHP | \$1,750 | 18.67% | \$3,500 | 6.90% | \$3,500 | 1.88% | \$7,000 | 0.34% |
| 2016 | Standard CDHP | \$1,750 | 19.69% | \$3,500 | 7.96% | \$3,500 | 2.17% | \$7,000 | 0.47% |
| 2017 | Standard CDHP | \$1,750 | 16.92% | \$3,750 | 6.35% | \$3,500 | 2.37% | \$7,500 | 0.41% |
| 2018 | Standard CDHP | \$1,750 | 11.87% | \$3,750 | 4.24% | \$3,500 | 1.56% | \$7,500 | 0.46% |

Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out-of-Pocket

Expenses *(continued)*

The following details the number of individuals and families by Health Plan that met their deductibles and/or maximum out-of-pocket (MOOP) expense for the years 2014-2018. This report is based on Incurred Medical and Pharmacy claims.

| Individuals and Families in LivingWell PPO (2014—Present) | | | | | | | | | |
|--|----------------|-------------|-----------------------|---------|--------------|------------|-----------------------|---------|--------------|
| | | Individuals | | | | Families | | | |
| Plan year | Plan Name | Deductible | Meeting De-deductible | MOOP | Meeting MOOP | Deductible | Meeting De-deductible | MOOP | Meeting MOOP |
| 2014 | LivingWell PPO | \$500 | 11.85% | \$2,500 | 3.74% | \$1,000 | 4.70% | \$3,000 | 0.49% |
| 2015 | LivingWell PPO | \$500 | 34.97% | \$2,500 | 0.69% | \$1,000 | 7.88% | \$5,000 | 0.16% |
| 2016 | LivingWell PPO | \$500 | 35.87% | \$2,500 | 0.65% | \$1,000 | 7.87% | \$5,000 | 0.13% |
| 2017 | LivingWell PPO | \$750 | 31.97% | \$2,750 | 0.64% | \$1,500 | 6.38% | \$5,500 | 0.07% |
| 2018 | LivingWell PPO | \$750 | 26.96% | \$2,751 | 0.63% | \$1,501 | 4.43% | \$5,501 | 0.04% |

| Individuals and Families in LivingWell CDHP (2014— Present) | | | | | | | | | |
|---|-----------------|-------------|-----------------------|---------|--------------|------------|-----------------------|---------|--------------|
| | | Individuals | | | | Families | | | |
| Plan year | Plan Name | Deductible | Meeting De-deductible | MOOP | Meeting MOOP | Deductible | Meeting De-deductible | MOOP | Meeting MOOP |
| 2014 | LivingWell CDHP | \$1,250 | 29.04% | \$2,500 | 8.89% | \$2,500 | 17.39% | \$5,000 | 2.24% |
| 2015 | LivingWell CDHP | \$1,250 | 29.30% | \$2,500 | 8.61% | \$2,500 | 17.55% | \$5,000 | 1.89% |
| 2016 | LivingWell CDHP | \$1,250 | 28.69% | \$2,500 | 9.17% | \$2,500 | 17.90% | \$5,000 | 2.35% |
| 2017 | LivingWell CDHP | \$1,250 | 28.20% | \$2,750 | 8.50% | \$2,500 | 17.56% | \$5,500 | 2.59% |
| 2018 | LivingWell CDHP | \$1,250 | 23.68% | \$2,750 | 6.33% | \$2,500 | 13.58% | \$5,500 | 1.99% |

Premium

The following details the amount of premium* paid by the employee and employer for 2014-2017 and monthly through 2018.

| Time Period | Employee Premium Amount | Employer Premium Amount | Total Premium Amount |
|--------------------|--------------------------------|--------------------------------|-----------------------------|
| 2014 | \$265,431,508 | \$1,348,631,926 | \$1,614,063,434 |
| 2015 | \$256,371,746 | \$1,362,686,924 | \$1,619,058,670 |
| 2016 | \$254,661,768 | \$1,380,830,820 | \$1,635,492,588 |
| 2017 | \$255,169,294 | \$1,374,862,647 | \$1,630,031,942 |
| Jan 2018 | \$22,239,007 | \$116,763,974 | \$139,002,981 |
| Feb 2018 | \$22,120,908 | \$116,327,869 | \$138,448,777 |
| Mar 2018 | \$22,131,853 | \$116,396,116 | \$138,527,969 |
| Apr 2018 | \$22,118,232 | \$116,236,042 | \$138,354,274 |
| May 2018 | \$22,099,949 | \$116,102,653 | \$138,202,602 |
| Jun 2018 | \$22,050,330 | \$115,795,144 | \$137,845,474 |
| Jul 2018 | \$21,972,612 | \$115,192,956 | \$137,165,569 |
| Aug 2018 | \$21,149,797 | \$113,338,175 | \$134,487,972 |
| Sep 2018 | \$21,474,698 | \$113,296,318 | \$134,771,016 |
| Oct 2018 | \$21,753,187 | \$114,894,606 | \$136,647,793 |
| Nov 2018 | \$21,764,580 | \$114,931,594 | \$136,696,174 |
| Dec 2018 | \$21,720,223 | \$114,888,817 | \$136,609,040 |

**Premium is based on enrollment using published premium rates—it is NOT based on actual payments received.*

Prescription Drug Utilization *(continued)*

The following details the type of prescription filled, the percent that were generic, and the generic efficiency percentage for the most recent rolling year. Based on Paid Pharmacy Claims.

| Time Period: Paid Month | Generic | Brand Name, Generic Available | Brand Name | Other* | Total | Scripts Rx % Generic | Scripts Generic Efficiency Rx** |
|------------------------------------|----------------|--|-------------------|---------------|--------------|---------------------------------|--|
| Jan 2018 | 340,570 | 9,103 | 34,883 | 9,152 | 393,708 | 86.50% | 97.40% |
| Feb 2018 | 312,187 | 6,332 | 30,986 | 9,318 | 358,823 | 87.00% | 98.01% |
| Mar 2018 | 339,067 | 6,841 | 35,007 | 9,402 | 390,317 | 86.87% | 98.02% |
| Apr 2018 | 314,680 | 6,347 | 36,884 | 10,139 | 368,050 | 85.50% | 98.02% |
| May 2018 | 326,602 | 6,321 | 42,202 | 10,318 | 385,443 | 84.73% | 98.10% |
| Jun 2018 | 308,393 | 6,182 | 36,834 | 9,360 | 360,769 | 85.48% | 98.03% |
| Jul 2018 | 308,837 | 6,325 | 36,584 | 10,359 | 362,105 | 85.29% | 97.99% |
| Aug 2018 | 315,594 | 6,826 | 37,577 | 10,403 | 370,400 | 85.20% | 97.88% |
| Sep 2018 | 294,685 | 14,492 | 37,257 | 9,942 | 356,376 | 82.69% | 95.31% |
| Oct 2018 | 325,987 | 25,312 | 43,674 | 11,249 | 406,222 | 80.25% | 92.79% |
| Nov 2018 | 308,769 | 23,656 | 43,723 | 11,624 | 387,772 | 79.63% | 92.88% |
| Dec 2018 | 333,489 | 7,192 | 41,232 | 11,954 | 393,867 | 84.67% | 97.89% |

**Other category includes: Over-the-Counter (usually items such as diabetic supplies, syringes, and test strips, etc.) and claims that were unable to be tagged to a specific group.*

***Generic Efficiency Rate means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.*

Prescription Drug Utilization *(continued)*

The following details the number of members and patients utilizing prescription benefits and the associated costs for the most recent rolling year. Based on Incurred Pharmacy Claims.

| Time Period | Members | Patients | Scripts | Scripts Per Member | Scripts Per Patient | Allow Amt* Per Script | Net Pay Per Script | Member Cost Per Script** | Patient Cost Per Script*** |
|--------------------|----------------|-----------------|----------------|---------------------------|----------------------------|------------------------------|---------------------------|---------------------------------|-----------------------------------|
| Oct 2017 | 263,913 | 165,974 | 399,042 | 1.51 | 2.98 | \$97.99 | \$89.08 | \$13.30 | \$21.16 |
| Nov 2017 | 264,289 | 160,793 | 391,950 | 1.48 | 2.95 | \$97.27 | \$88.60 | \$12.70 | \$20.88 |
| Dec 2017 | 264,340 | 160,952 | 415,646 | 1.57 | 3.05 | \$97.64 | \$89.04 | \$13.34 | \$21.91 |
| Jan 2018 | 266,817 | 161,213 | 392,645 | 1.47 | 2.93 | \$100.14 | \$81.24 | \$27.11 | \$44.87 |
| Feb 2018 | 265,925 | 158,304 | 359,699 | 1.35 | 2.76 | \$96.47 | \$80.05 | \$21.65 | \$36.36 |
| Mar 2018 | 266,244 | 159,324 | 391,650 | 1.47 | 2.95 | \$100.79 | \$86.33 | \$20.47 | \$34.20 |
| Apr 2018 | 266,003 | 155,805 | 367,921 | 1.38 | 2.87 | \$105.98 | \$92.68 | \$17.89 | \$30.55 |
| May 2018 | 265,854 | 158,351 | 385,106 | 1.45 | 2.93 | \$106.51 | \$94.26 | \$17.33 | \$29.10 |
| Jun 2018 | 265,297 | 154,599 | 359,467 | 1.35 | 2.87 | \$114.44 | \$101.88 | \$16.63 | \$28.54 |
| Jul 2018 | 264,248 | 157,632 | 361,625 | 1.37 | 2.89 | \$117.09 | \$105.08 | \$16.06 | \$26.92 |
| Aug 2018 | 255,030 | 157,757 | 370,427 | 1.45 | 2.91 | \$114.31 | \$102.98 | \$16.08 | \$26.00 |
| Sep 2018 | 257,736 | 152,858 | 356,721 | 1.38 | 2.83 | \$113.29 | \$102.85 | \$13.97 | \$23.55 |

***"Allow Amt" is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.*

****"Member Cost per Script" is the average net amount paid per prescription filled per member (Net Pay Rx/Members)*

****"Patient Cost per Script" is the average net amount paid per prescription filled per Patients (Net Pay Rx/Patients)*

Prescription Drug Utilization *(continued)*

The following Top 25 Drug Analysis is based on Incurred Pharmacy Claims from Jan-Sep 2018.

| Prev Rank | Curr Rank | Product Name | Brand/Generic | Therapeutic Class General | Net Pay Rx | Net Pay Rx as % of All Drugs | Scripts Rx | Net Pay Per Day Supply Rx | Patients Rx |
|------------------|------------------|---------------------|-------------------------------|----------------------------------|-------------------|-------------------------------------|-------------------|----------------------------------|--------------------|
| 1 | 1 | HUMIRA | Single source brand | Immunosuppressants | \$24,604,662.10 | 7.83% | 3,339 | \$183.82 | 725 |
| 2 | 2 | ENBREL | Single source brand | Immunosuppressants | \$10,196,416.51 | 3.24% | 1,381 | \$167.87 | 346 |
| 3 | 3 | STELARA | Single source brand | Immunosuppressants | \$8,087,814.21 | 2.57% | 513 | \$217.40 | 187 |
| 4 | 4 | FARXIGA | Single source brand | Hormones & Synthetic Subst | \$6,803,915.23 | 2.16% | 12,063 | \$13.81 | 2,489 |
| 5 | 5 | TRULICITY | Single source brand | Hormones & Synthetic Subst | \$6,230,331.49 | 1.98% | 7,824 | \$23.32 | 1,482 |
| 6 | 6 | JANUVIA | Single source brand | Hormones & Synthetic Subst | \$5,859,672.93 | 1.86% | 10,929 | \$12.71 | 2,429 |
| 7 | 7 | VICTOZA | Single source brand | Hormones & Synthetic Subst | \$5,700,440.43 | 1.81% | 6,536 | \$22.95 | 1,454 |
| 8 | 8 | NOVOLOG FLEXPEN | Single source brand | Hormones & Synthetic Subst | \$5,403,289.17 | 1.72% | 6,113 | \$22.61 | 1,731 |
| 10 | 9 | TRESIBA | Single source brand | Hormones & Synthetic Subst | \$5,117,859.80 | 1.63% | 6,270 | \$19.85 | 1,539 |
| 9 | 10 | NOVOLOG | Single source brand | Hormones & Synthetic Subst | \$5,090,992.27 | 1.62% | 5,116 | \$24.92 | 1,184 |
| 11 | 11 | GILENYA | Single source brand | Misc Therapeutic Agents | \$4,626,724.49 | 1.47% | 325 | \$247.15 | 82 |
| 12 | 12 | TECFIDERA | Single source brand | Misc Therapeutic Agents | \$4,193,179.38 | 1.33% | 394 | \$229.14 | 85 |
| 13 | 13 | SAXENDA | Single source brand | Hormones & Synthetic Subst | \$4,103,382.35 | 1.31% | 3,657 | \$34.77 | 1,118 |
| 14 | 14 | DUEXIS | Single source brand | Central Nervous System | \$4,087,169.93 | 1.30% | 1,941 | \$70.15 | 599 |
| 15 | 15 | HUMATROPE | Multisource brand, no generic | Hormones & Synthetic Subst | \$3,312,839.38 | 1.05% | 297 | \$207.98 | 85 |
| 16 | 16 | XOLAIR | Single source brand | Immunosuppressants | \$2,863,331.57 | 0.91% | 827 | \$102.28 | 173 |
| 17 | 17 | COPAXONE | Multisource brand, generic | Misc Therapeutic Agents | \$2,845,801.19 | 0.91% | 299 | \$192.96 | 74 |
| 18 | 18 | LEVEMIR FLEXTOUCH | Single source brand | Hormones & Synthetic Subst | \$2,793,471.48 | 0.89% | 4,194 | \$16.27 | 1,051 |
| 19 | 19 | LYRICA | Single source brand | Central Nervous System | \$2,699,034.52 | 0.86% | 5,542 | \$15.09 | 1,198 |
| 21 | 20 | COSENTYX | Single source brand | Immunosuppressants | \$2,417,093.85 | 0.77% | 372 | \$185.15 | 85 |
| 20 | 21 | VYVANSE | Single source brand | Central Nervous System | \$2,390,007.13 | 0.76% | 11,377 | \$6.95 | 2,281 |
| 22 | 22 | XARELTO | Single source brand | Blood Form/Coagul Agents | \$2,299,443.39 | 0.73% | 5,178 | \$12.26 | 1,136 |
| 23 | 23 | ONE TOUCH ULTRA | Other/unavailable | Diagnostic Agents | \$2,207,259.74 | 0.70% | 16,174 | \$3.35 | 5,618 |
| 24 | 24 | ELIQUIS | Single source brand | Blood Form/Coagul Agents | \$2,157,234.19 | 0.69% | 4,873 | \$12.20 | 1,124 |
| 25 | 25 | AUBAGIO | Single source brand | Immunosuppressants | \$2,006,843.57 | 0.64% | 218 | \$224.68 | 42 |

*"Product Name" includes all strengths/formulations of a drug.

Prescription Drug Utilization *(continued)*

In summary, the top 25 drugs represent 3.46% of total scripts and 40.75% of total Pharmacy expenditures.

| Summary | Net Pay Rx | Scripts Rx | Days Supply Rx |
|-------------------------------|---------------|------------|----------------|
| Top Drugs | \$128,098,210 | 115,752 | 4,414,026 |
| All Product Names | \$314,355,996 | 3,345,261 | 114,770,539 |
| Top Drugs as Pct of All Drugs | 40.75% | 3.46% | 3.85% |

Utilization

The top 25 clinical conditions based on Incurred Medical Claims for Jan-Sep 2018.

| Prev Rank | Curr Rank | Clinical Condition | Net Pay Med | Net Pay IP Acute | Net Pay OP Med | Admits Per 1000 Acute | Days LOS Admit Acute | Visits Per 1000 Office Med | Visits Per 1000 ER | Patients Med | Net Pay Per Pat Med |
|-----------|-----------|--------------------------------|--------------|------------------|----------------|-----------------------|----------------------|----------------------------|--------------------|--------------|---------------------|
| 1 | 1 | Prevent/Admin Hlth Encounters | \$60,247,964 | \$483,089 | \$59,680,018 | 0.01 | 10.00 | 1101.44 | 0.54 | 152,143 | \$396.00 |
| 2 | 2 | Osteoarthritis | \$29,871,412 | \$17,671,106 | \$12,178,697 | 2.97 | 1.70 | 131.64 | 0.28 | 13,814 | \$2,162.40 |
| 3 | 3 | Coronary Artery Disease | \$26,342,355 | \$15,733,593 | \$10,582,167 | 1.95 | 4.04 | 29.53 | 2.28 | 4,581 | \$5,750.35 |
| 5 | 4 | Signs/Symptoms/Oth Cond, NEC | \$25,218,726 | \$3,123,915 | \$21,776,146 | 0.74 | 6.22 | 415.61 | 10.37 | 68,540 | \$367.94 |
| 4 | 5 | Chemotherapy Encounters | \$25,133,047 | \$2,910,369 | \$22,222,678 | 0.32 | 5.65 | 2.04 | 0.01 | 628 | \$40,020.78 |
| 6 | 6 | Pregnancy without Delivery | \$21,166,913 | \$16,356,695 | \$4,807,875 | 0.56 | 2.57 | 87.09 | 5.50 | 4,764 | \$4,443.10 |
| 7 | 7 | Spinal/Back Disord, Low Back | \$20,374,377 | \$8,468,663 | \$11,897,614 | 0.84 | 3.04 | 554.39 | 3.91 | 25,849 | \$788.21 |
| 8 | 8 | Gastroint Disord, NEC | \$18,414,280 | \$4,850,703 | \$13,558,029 | 1.14 | 4.15 | 133.36 | 15.55 | 25,975 | \$708.92 |
| 10 | 9 | Respiratory Disord, NEC | \$17,929,137 | \$6,268,455 | \$11,603,530 | 0.46 | 5.62 | 78.95 | 9.31 | 19,139 | \$936.79 |
| 9 | 10 | Arthropathies/Joint Disord NEC | \$17,735,539 | \$1,548,941 | \$16,101,593 | 0.26 | 4.14 | 546.27 | 5.59 | 41,860 | \$423.69 |
| 11 | 11 | Newborns, w/wo Complication | \$16,698,805 | \$16,293,490 | \$405,314 | 10.40 | 3.04 | 8.99 | 0.18 | 2,489 | \$6,709.04 |
| 12 | 12 | Condition Rel to Tx - Med/Surg | \$14,792,760 | \$10,130,412 | \$4,643,114 | 1.44 | 5.56 | 6.32 | 1.71 | 3,630 | \$4,075.14 |
| 13 | 13 | Infections, NEC | \$12,714,202 | \$11,451,906 | \$1,204,229 | 0.14 | 6.70 | 72.37 | 2.32 | 15,078 | \$843.23 |
| 14 | 14 | Cancer - Breast | \$12,139,156 | \$408,529 | \$11,680,503 | 0.10 | 3.25 | 23.04 | 0.03 | 1,959 | \$6,196.61 |
| 15 | 15 | Cardiac Arrhythmias | \$12,045,144 | \$3,218,458 | \$8,812,409 | 0.69 | 2.79 | 33.74 | 2.13 | 5,309 | \$2,268.82 |
| 16 | 16 | Diabetes | \$11,296,979 | \$2,384,419 | \$8,894,544 | 1.59 | 5.10 | 235.30 | 1.56 | 24,386 | \$463.26 |
| 17 | 17 | Cerebrovascular Disease | \$10,602,088 | \$7,856,331 | \$2,652,963 | 1.40 | 7.67 | 8.39 | 1.38 | 1,612 | \$6,576.98 |
| 18 | 18 | Renal Function Failure | \$10,480,692 | \$2,286,334 | \$8,184,282 | 0.26 | 4.98 | 14.58 | 0.65 | 2,399 | \$4,368.78 |
| 19 | 19 | Spinal/Back Disord, Ex Low | \$10,226,313 | \$2,362,956 | \$7,845,942 | 0.28 | 5.61 | 498.46 | 2.66 | 20,920 | \$488.83 |
| 20 | 20 | Cardiovasc Disord, NEC | \$9,841,766 | \$1,449,562 | \$8,371,931 | 0.34 | 5.19 | 65.19 | 8.54 | 14,195 | \$693.33 |
| 21 | 21 | Cholecystitis/Cholelithiasis | \$9,141,070 | \$2,254,188 | \$6,883,913 | 0.71 | 3.90 | 4.16 | 1.52 | 1,528 | \$5,982.38 |
| 22 | 22 | Urinary Tract Calculus | \$8,562,588 | \$840,938 | \$7,721,419 | 0.53 | 2.50 | 18.72 | 5.76 | 3,294 | \$2,599.45 |
| 23 | 23 | Hypertension, Essential | \$8,323,895 | \$4,247,880 | \$4,063,203 | 0.83 | 5.45 | 261.79 | 2.87 | 38,171 | \$218.07 |
| 24 | 24 | Overweight/Obesity | \$7,634,204 | \$6,173,001 | \$1,444,922 | 1.57 | 2.11 | 37.45 | 0.01 | 5,257 | \$1,452.20 |
| - | 25 | ENT Disorders, NEC | \$7,324,245 | \$198,542 | \$7,124,380 | 0.08 | 2.73 | 628.22 | 1.99 | 33,726 | \$217.17 |

NOTE: Medical payments represent only the payments made for the specified condition.

Utilization *(continued)*

In Summary, the top clinical conditions represent more than 57.38% of total Paid Medical Claims for all clinical conditions.

| Summary | Net Pay Med | Net Pay IP Acute | Net Pay OP Med | Admits Per 1000 Acute | Days LOS Admit Acute | Visits Per 1000 Office Med | Visits Per 1000 ER |
|---|---------------|---------------------|-------------------|--------------------------|-------------------------|-------------------------------|-----------------------|
| Top Clinical Conditions | \$424,257,660 | \$148,972,476 | \$274,341,419 | 29.58 | 4.55 | 4,997.03 | 86.65 |
| All Clinical Conditions | \$739,347,426 | \$239,529,529 | \$497,649,338 | 63.36 | 4.57 | 8,945.72 | 192.58 |
| Top Clinical Conditions as Pct of All Clinical Conditions | 57.38% | 62.19% | 55.13% | 46.68% | 99.58% | 55.86% | 45.00% |

Claims Lag Analysis

The following claims lag information is based on Incurred Medical Claims from Jan-Sep 2018.

| Plan | Number of Medical Claims | Avg Days Lag Per Claim | % Claims Paid Within 30 Days | % Claims Paid Within 60 Days | % Claims Paid Within 90 Days |
|-----------------|---------------------------------|-------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| LivingWell CDHP | 3,134,541 | 17 | 90.82% | 97.43% | 98.81% |
| LivingWell PPO | 2,292,571 | 17 | 90.89% | 97.47% | 98.80% |
| Standard CDHP | 175,993 | 18 | 88.89% | 96.45% | 98.33% |
| Standard PPO | 468,139 | 19 | 88.80% | 96.59% | 98.35% |
| Missing | 16,137 | 25 | 80.02% | 95.06% | 97.46% |
| All Plans | 6,087,381 | 15 | 90.61% | 97.34% | 98.76% |

**Missing means the claims could not be tagged to a specific plan.*

Claims Lag Analysis *(continued)*

The following claims lag information is based on all claims (**Medical and Pharmacy**) incurred and paid during the most recent rolling year.

| | Month Paid | | | | | |
|---------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Service Month | Jan 2018 | Feb 2018 | Mar 2018 | Apr 2018 | May 2018 | Jun 2018 |
| Oct 2017 | \$2,084,433.33 | \$1,444,846.81 | \$689,207.87 | \$405,994.88 | \$147,822.86 | \$281,365.98 |
| Nov 2017 | \$7,353,466.99 | \$2,349,427.80 | \$1,948,185.07 | \$707,191.43 | \$168,120.94 | \$597,491.44 |
| Dec 2017 | \$48,625,423.47 | \$9,098,568.45 | \$3,392,830.97 | \$1,431,483.33 | \$712,599.32 | \$417,914.88 |
| Jan 2018 | \$49,324,696.29 | \$33,977,465.53 | \$10,245,229.43 | \$2,476,174.39 | \$1,754,680.42 | \$581,149.84 |
| Feb 2018 | \$3,801.59 | \$48,324,462.05 | \$37,700,092.19 | \$7,781,814.83 | \$2,150,956.48 | \$1,347,890.23 |
| Mar 2018 | \$0.00 | \$11,818.99 | \$64,741,122.82 | \$33,775,513.18 | \$9,119,805.50 | \$1,764,811.24 |
| Apr 2018 | \$0.00 | \$0.00 | \$5,873.30 | \$62,474,394.60 | \$38,238,947.42 | \$9,341,930.54 |
| May 2018 | \$0.00 | \$0.00 | \$0.00 | \$3,665.99 | \$62,638,420.84 | \$47,389,632.54 |
| Jun 2018 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$5,098.18 | \$68,831,848.33 |
| Jul 2018 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$5,096.28 |
| Aug 2018 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Sep 2018 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |

| | Month Paid | | | | | |
|---------------|-----------------|-----------------|-----------------|-----------------|-----------------|----------------|
| Service Month | Jul 2018 | Aug 2018 | Sep 2018 | Oct 2018 | Nov 2018 | Dec 2018 |
| Oct 2017 | (\$3,399.74) | (\$26,044.06) | (\$61,289.68) | \$6,710.44 | (\$90,939.69) | (\$152,169.15) |
| Nov 2017 | (\$36,363.14) | \$145,099.58 | \$55,161.34 | (\$78,436.51) | \$94,993.36 | \$45,951.82 |
| Dec 2017 | \$352,913.78 | \$816,473.46 | \$108,132.81 | (\$94,540.13) | (\$41,867.60) | \$69,376.88 |
| Jan 2018 | \$225,963.27 | \$831,429.91 | \$1,346,192.60 | \$37,989.88 | \$172,858.18 | \$18,304.30 |
| Feb 2018 | \$1,783,660.77 | \$259,917.39 | \$4,619.06 | \$10,021.45 | \$79,585.95 | (\$2,520.07) |
| Mar 2018 | \$981,921.15 | \$1,016,962.06 | \$693,139.46 | \$16,568.86 | \$207,459.08 | \$32,487.85 |
| Apr 2018 | \$2,845,831.77 | \$942,969.21 | \$863,787.63 | \$244,265.81 | \$72,633.24 | \$36,900.92 |
| May 2018 | \$8,444,218.03 | \$2,538,420.15 | \$600,659.14 | \$675,879.47 | \$575,001.60 | \$228,979.18 |
| Jun 2018 | \$43,589,208.11 | \$10,756,767.11 | \$1,484,708.14 | \$665,423.29 | \$422,993.94 | \$515,136.02 |
| Jul 2018 | \$61,687,485.87 | \$53,583,433.17 | \$10,054,974.10 | \$2,090,917.46 | \$1,709,484.32 | \$962,404.54 |
| Aug 2018 | \$9,091.25 | \$69,779,021.27 | \$44,839,633.92 | \$8,045,307.27 | \$3,918,851.15 | \$874,454.41 |
| Sep 2018 | \$0.00 | \$15,249.51 | \$64,476,347.48 | \$40,456,457.89 | \$11,676,310.50 | \$2,285,201.56 |

Claims Distribution Based on Age/Gender

The following is based on Incurred Medical and Pharmacy Claims from Jan-Sep 2018.

| | Female | | | Male | | |
|--------------|----------------|-------------------------|--------------------|----------------|-------------------------|--------------------|
| Age Group | Members Avg | Net Pay Med and Rx | Net Pay Per Member | Members Avg | Net Pay Med and Rx | Net Pay Per Member |
| Ages < 1 | 1,162 | \$13,558,041.46 | \$11,665.62 | 1,195 | \$12,964,309.38 | \$10,851.82 |
| Ages 1-4 | 5,124 | \$8,009,654.09 | \$1,563.23 | 5,424 | \$8,473,983.23 | \$1,562.25 |
| Ages 5-9 | 7,572 | \$8,063,462.35 | \$1,064.87 | 8,028 | \$10,118,377.52 | \$1,260.39 |
| Ages 10-14 | 9,157 | \$13,174,550.64 | \$1,438.78 | 9,475 | \$14,606,665.17 | \$1,541.56 |
| Ages 15-17 | 5,756 | \$15,715,575.33 | \$2,730.51 | 6,021 | \$13,146,048.68 | \$2,183.45 |
| Ages 18-19 | 3,999 | \$8,065,380.87 | \$2,016.74 | 4,072 | \$9,012,290.61 | \$2,213.23 |
| Ages 20-24 | 9,613 | \$22,936,043.01 | \$2,386.00 | 9,118 | \$12,713,497.76 | \$1,394.38 |
| Ages 25-29 | 8,271 | \$24,261,816.97 | \$2,933.36 | 5,021 | \$7,621,847.97 | \$1,517.96 |
| Ages 30-34 | 9,182 | \$31,806,875.94 | \$3,464.21 | 5,247 | \$9,693,233.24 | \$1,847.27 |
| Ages 35-39 | 11,336 | \$37,913,746.95 | \$3,344.51 | 6,541 | \$14,394,929.79 | \$2,200.61 |
| Ages 40-44 | 12,151 | \$47,750,456.39 | \$3,929.61 | 7,360 | \$22,764,433.65 | \$3,093.09 |
| Ages 45-49 | 14,554 | \$62,636,743.76 | \$4,303.65 | 8,859 | \$33,305,223.19 | \$3,759.67 |
| Ages 50-54 | 15,056 | \$82,103,872.62 | \$5,453.39 | 9,829 | \$52,084,061.32 | \$5,299.20 |
| Ages 55-59 | 17,468 | \$107,279,703.60 | \$6,141.42 | 10,533 | \$67,126,384.20 | \$6,372.69 |
| Ages 60-64 | 19,661 | \$145,207,806.05 | \$7,385.45 | 12,028 | \$92,195,486.31 | \$7,665.21 |
| Ages 65-74 | 2,475 | \$19,695,517.30 | \$7,957.78 | 2,057 | \$21,296,440.21 | \$10,352.04 |
| Ages 75-84 | 159 | \$1,530,501.18 | \$9,632.52 | 169 | \$2,388,902.28 | \$14,172.79 |
| Ages 85+ | 5 | \$29,694.62 | \$5,809.82 | 6 | \$57,864.23 | \$10,211.33 |
| Total | 152,701 | \$649,739,443.13 | \$4,254.98 | 110,982 | \$403,963,978.74 | \$3,639.91 |

Allowed Amount Distribution by Member Count

The following table shows the distribution of members for whom the amounts of charges within the specified ranges were allowed. The data appears for the years of 2014—2017 and year to date for 2018.

| Allowed Amount | 2014 | 2015 | 2016 | 2017 | 2018 |
|-----------------------------|----------------|----------------|----------------|----------------|----------------|
| less than 0.00 | 22 | 4 | 2 | 1 | 3 |
| \$0.00 - \$499.99 | 66,180 | 72,760 | 72,610 | 71,224 | 82,090 |
| \$500.00 - \$999.99 | 39,137 | 39,862 | 40,982 | 41,530 | 43,255 |
| \$1,000.00 - \$1,999.99 | 43,065 | 41,247 | 40,963 | 42,070 | 40,162 |
| \$2,000.00 - \$4,999.99 | 51,911 | 49,217 | 48,715 | 49,627 | 42,803 |
| \$5,000.00 - \$9,999.99 | 29,515 | 26,834 | 27,297 | 26,746 | 21,530 |
| \$10,000.00 - \$14,999.99 | 12,825 | 11,369 | 11,646 | 12,092 | 9,352 |
| \$15,000.00 - \$19,999.99 | 6,755 | 5,605 | 6,152 | 6,387 | 4,737 |
| \$20,000.00 - \$29,999.99 | 6,374 | 5,612 | 5,909 | 6,216 | 4,720 |
| \$30,000.00 - \$49,999.99 | 5,272 | 4,475 | 4,842 | 5,065 | 3,974 |
| \$50,000.00 - \$74,999.99 | 2,520 | 2,225 | 2,346 | 2,682 | 1,923 |
| \$75,000.00 - \$99,999.99 | 1,037 | 944 | 1,114 | 1,211 | 793 |
| \$100,000.00 - \$149,999.99 | 846 | 777 | 885 | 951 | 708 |
| \$150,000.00 - \$199,999.99 | 344 | 320 | 331 | 376 | 273 |
| \$200,000.00 - \$249,999.99 | 179 | 148 | 173 | 169 | 130 |
| over \$249,999.99 | 326 | 231 | 253 | 287 | 185 |
| Total | 266,308 | 261,630 | 264,220 | 266,634 | 256,638 |

Summary of Enrollment and Claims

The following provides a summary of members, Incurred Medical Claims and Incurred Pharmacy Claims for the most recent rolling year.

| Time Period | Members | Net Pay Med and Rx | Net Pay Med | Net Pay Rx | Claims Paid | Claims Paid Med | Scripts Rx |
|--------------------|----------------|---------------------------|--------------------|-------------------|--------------------|------------------------|-------------------|
| Oct 2017 | 263,913 | \$126,207,204.17 | \$90,660,049.25 | \$35,547,154.92 | 719,323 | 313,042 | 399,042 |
| Nov 2017 | 264,289 | \$124,674,377.21 | \$89,946,496.06 | \$34,727,881.15 | 701,360 | 301,989 | 391,950 |
| Dec 2017 | 264,340 | \$141,947,828.62 | \$104,938,486.14 | \$37,009,342.48 | 724,544 | 301,968 | 415,646 |
| Jan 2018 | 266,817 | \$100,994,193.31 | \$69,095,234.88 | \$31,898,958.43 | 693,177 | 292,252 | 392,645 |
| Feb 2018 | 265,925 | \$99,444,301.92 | \$70,650,556.78 | \$28,793,745.14 | 652,025 | 284,751 | 359,699 |
| Mar 2018 | 266,244 | \$112,361,610.19 | \$78,551,327.78 | \$33,810,282.41 | 697,471 | 298,745 | 391,650 |
| Apr 2018 | 266,003 | \$115,067,534.44 | \$80,967,347.41 | \$34,100,187.03 | 660,409 | 284,929 | 367,921 |
| Jun 2018 | 265,297 | \$126,271,183.12 | \$89,650,167.38 | \$36,621,015.74 | 658,206 | 291,179 | 359,467 |
| May 2018 | 265,854 | \$123,094,876.94 | \$86,793,119.53 | \$36,301,757.41 | 686,704 | 293,989 | 385,106 |
| Jul 2018 | 264,248 | \$130,093,795.74 | \$92,095,923.43 | \$37,997,872.31 | 671,747 | 302,343 | 361,625 |
| Aug 2018 | 255,030 | \$127,466,359.27 | \$89,321,592.42 | \$38,144,766.85 | 679,972 | 301,763 | 370,427 |
| Sep 2018 | 257,736 | \$118,909,566.94 | \$82,222,156.74 | \$36,687,410.20 | 627,931 | 263,898 | 356,721 |

NOTE: Includes run out data from all Carriers

The following illustrates the change in incurred claims (includes Medical and Pharmacy) by rolling year.

| Time Period | Members | Total Medical and Rx Claims | Total Medical Claims | Total Rx Claims |
|---------------------|----------------|------------------------------------|-----------------------------|------------------------|
| Oct 2017 - Sep 2018 | 263,808 | \$1,456,238,187 | \$1,034,328,784 | \$421,909,403 |
| Oct 2016 - Sep 2017 | 262,525 | \$1,370,810,722 | \$976,190,081 | \$394,620,641 |
| % Change (Roll Yrs) | 0.49% | 6.23% | 5.96% | 6.92% |

Appendix A

The Department of Employee Insurance (DEI) is pleased to provide an analysis of the Kentucky Employees' Health Plan for members of the Kentucky Group Health Insurance Board (KGHIB).

It is the Department's intent to update this information on a monthly basis in an effort to provide current information about Kentucky's Health Insurance Program.

This report is compiled using Advantage Suite, which is DEI's health insurance information management system. Truven warehouses enrollment and claims data on behalf of the KEHP. Enrollment data is provided by DEI while claims data is provided by KEHP's Medical and Pharmacy administrators

Claims information may be analyzed by either "incurred" or "paid" dates. "Incurred" reports specify paid amounts for claims that were incurred in a specified timeframe. Due to the lag time in submittal and payment of claims, historical reports that are based on incurred claims may change significantly with each new database update since additional incurred claims will be added. "Paid" claims reports specify the paid amount for claims regardless of when the claims may have been incurred. Unless otherwise specified, data contained in this report are based on "incurred" claims.

Enrollment in the KEHP changes on a daily basis due to a variety of reasons such as: new hires, adding and dropping dependents, marriage, divorce, Medicare eligibility, etc. Therefore, Advantage Suite is dealing with a fluid enrollment base. Also, each carrier processes claims slightly differently. During 2016, Advantage Suite processed enrollment information for a total of 262,032 members as well as 7,988,668 claims (3,350,167 Medical claims and 4,553,510 prescriptions) from different carriers. When dealing with such large numbers it is impossible to tag every claim to a corresponding group, carrier, service type, etc. While the tagging rate for the KEHP data exceeds 99%, you may still see information on reports stated as "~Missing". This indicates any enrollment or claims that could not be "tagged" by Advantage Suite.

Appendix B—Definitions

- ***Allowed Amount*** is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.
- ***Carrier*** refers to claims listed by carrier. (Please note that CVS data is designated as Anthem).
- ***Days Supply*** is the number of days for which drugs were supplied for prescriptions filled. It represents the number of days of drug therapy covered by a prescription.
- ***Employee*** represents an individual eligible to participate in KEHP as a retiree, or by being employed by one of the agencies that participate with KEHP (example: state employee, school board, quasi agency, etc.). Employee may also be referred to as “planholder” or “contracts”. Please note that Advantage Suite deals with Cross-Reference plans uniquely. Although there are in fact two “employees” Advantage Suite can only designate the planholder as an employee. Therefore, the Cross-Reference spouse is considered a dependent and all claims and utilization data related to that spouse is counted as a “member”.
- ***Generic Efficiency*** means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.
- ***Group*** is Kentucky Retirement System (KRS), Kentucky Teachers’ Retirement System (TRS), State Employees, School Boards, or Other (includes: COBRA, Health Departments, KCTCS, and Quasi/Local Governments).
- ***Incurred Claims*** refer to paid amounts for claims that were incurred in a specified timeframe.
- ***IP*** refers inpatient procedures and/or claims.
- ***LOS*** refers to length of stay of an acute admission.
- ***Mail Order*** is computed as any script filled with a “days supply” of more than 30 days, regardless of the physical location where the prescription was filled.
- ***Member*** includes all employees plus any dependents that are covered through the KEHP. Members may also be referred to as “covered lives”.
- ***Member Cost per Script*** is the average net amount paid per prescription filled per member (Net Pay Rx/Members).
- ***Net Payment*** is the net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, co-payment, coinsurance, and deductible amounts have been subtracted.
- ***OOP*** is the amount paid out-of-pocket by the member for facility, professional, and prescription drug services. This generally includes coinsurance, co-payment, and deductible amounts.
- ***OP*** refers to outpatient procedures and/or claims.
- ***OP Rad*** refers to outpatient radiology claims an/or patients.

Appendix B—Definitions *(continued)*

- ***Paid Claims*** specify the paid amount for claims regardless of when the claims may have been incurred.
- ***Patient Cost per Script*** is the average net amount paid per prescription filled per patient (Net Pay Rx/Patients).
- ***Patients*** is the unique count of members who received facility, professional, or pharmacy services.
- ***Plan*** is CW Standard PPO, CW Capitol Choice, CW Optimum PPO, CW Maximum Choice, Standard PPO, Standard CDHP, LivingWell PPO and LivingWell CDHP.
- ***Rcnt SGovt*** refers to recent State Government benchmarks.
- ***Rcnt US*** refers to recent US national benchmarks.
- ***Retail*** is computed as any script filled with a “days supply” of 30 days or less, regardless of the physical location where the prescription was filled.